

12 4412

Ack'd: 23/12/63.

KENT COUNTY COUNCIL

---

# ANNUAL REPORT

OF THE

## MEDICAL OFFICER OF HEALTH

For the Year 1959

A. ELLIOTT, M.D., D.P.H.

*County Medical Officer of Health*





KENT COUNTY COUNCIL

---

# ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

For the Year 1959

A. ELLIOTT, M.D., D.P.H.  
*County Medical Officer of Health*



---

Printed by  
F. A. Clements (Chatham) Ltd., 399 High Street, Chatham, Kent.

## SENIOR STAFF — HEALTH DEPARTMENT

## COUNTY MEDICAL OFFICER AND PRINCIPAL SCHOOL MEDICAL OFFICER

A. Elliott, M.D., D.P.H.

## DEPUTY COUNTY MEDICAL OFFICER AND DEPUTY PRINCIPAL SCHOOL MEDICAL OFFICER

D. M. Lyon, O.B.E., M.B., CH.B., D.P.H.

## SENIOR ASSISTANT COUNTY MEDICAL OFFICERS

L. M. Allen, M.B., CH.B., D.P.H.

J. H. Hazeldene, M.B., CH.B.

G. P. Wallace, M.A., M.B., CH.B., D.P.H. (Also Principal Medical Officer Areas 3 &amp; 5.)

## PRINCIPAL MEDICAL OFFICERS

J. Marshall, M.B., CH.B., D.P.H. .. Area 1.

G. L. Brocklehurst, M.D., D.P.H. .. Area 2.

P. Crowley, M.B., B.CH., D.P.H. .. Area 4.

M. A. G. Ward, M.B., CH.B., D.P.H. Areas 6 &amp; 7.

## PRINCIPAL SCHOOL DENTAL OFFICER

F. J. Saunders, L.D.S.

## RESIDENTIAL SERVICES OFFICER

W. E. Allison, F.I.S.W.

## SENIOR MIDWIFERY AND NURSING OFFICER

Miss C. E. Sanders, S.R.N., S.C.M., H.V. CERT., Q.I.D.N. TRAINING.

## DEPUTY MIDWIFERY AND NURSING OFFICER

Miss D. E. C. Bradley, S.R.N., S.C.M., M.T.D.

## SUPERINTENDENT HEALTH VISITOR

Miss A. Clarke, S.R.N., S.C.M., H.V. CERT.

## DEPUTY SUPERINTENDENT HEALTH VISITORS

Miss N. Lyle, S.C.M., H.V. DIPLOMA, S.I.E.B.

Miss F. L. Gray, S.R.N., S.C.M., H.V. CERT.

## SENIOR PHYSIOTHERAPIST

Miss R. Cheeseman, C.S.P.

## SUPERVISOR OF COUNTY DOMESTIC HELP SERVICE

Miss N. Burr, S.C.M., H.V. DIPLOMA, S.I.E.B.

## SUPERINTENDENT DISTRICT OFFICER

F. J. Cooper

## CHIEF CLERK

F. C. Woodruffe, T.D., A.I.S.W.

## COUNTY HEALTH INSPECTOR

E. P. May, M.R.S.I., A.I.MECH.E.

## AMBULANCE OFFICER

R. H. Wigmore

## CONTENTS

---

<i>Prefatory Letter</i> .. .. .	4
VITAL STATISTICS .. .. .	6
NOTIFIABLE INFECTIOUS DISEASES .. .. .	8
IMMUNISATION AND VACCINATION .. .. .	9
PREVENTION OF ILLNESS, CARE AND AFTER-CARE.. .. .	13
ORTHOPAEDIC SERVICES AND TUBERCULOSIS .. .. .	14
CARE OF MOTHERS AND YOUNG CHILDREN .. .. .	16
HEALTH VISITING .. .. .	17
DENTAL TREATMENT .. .. .	18
DOMESTIC HELP SERVICE .. .. .	19
FAMILY HELP SERVICE.. .. .	19
CHILD HELP SERVICE .. .. .	19
NIGHT ATTENDANT SERVICE .. .. .	20
MIDWIFERY AND DISTRICT NURSING SERVICES .. .. .	20
BLIND PERSONS .. .. .	25
WELFARE SERVICES FOR THE HANDICAPPED .. .. .	27
AMBULANCE SERVICE .. .. .	28
MENTAL HEALTH .. .. .	30
ENVIRONMENTAL HEALTH .. .. .	31
RESIDENTIAL SERVICES.. .. .	36
STATISTICAL TABLES .. .. .	39

HEALTH DEPARTMENT,  
COUNTY HALL,  
MAIDSTONE.

(Tel. 4321)

*September, 1960.*

**To the Chairman and Members of the Kent County Council.**

The population of the Administrative County is now 1,636,000, which is an increase of 12,000 over the previous year, and the number of births—25,574—is an increase of 385. The birth rate, which has risen to 15.63, is again slightly higher than that for the previous year, but the most noteworthy figure is that of the infantile mortality rate. This rate, which is the number of children who die within the first year of life, expressed in terms of a thousand live births, is now 18.22, which is the lowest rate ever recorded in the County and compares with 20.05 for 1958.

The infantile mortality rate is generally considered to be a valuable index of the state of health and well-being of a community. Even the low rate of 18.22 expressed in terms of human life means that in Kent 466 infants died in 1959 before attaining their first birthday. Of the diagnosable conditions the greatest single cause of death was of congenital malformations in 90 cases followed by 64 deaths from influenza, pneumonia, bronchitis and other diseases of the respiratory system. Whilst research continues into the causation of congenital malformations the relatively large number of deaths occurring in babies from diseases of the respiratory tract calls for a wider understanding on the part of parents that minor respiratory infections, even such as the common cold, which to older children and adults are no more than minor ailments, can be serious diseases to babies whose susceptibility to these ailments is far greater than is generally realised.

There is, of course, a general acceptance of the fact that national and local spending on health and welfare services involves the expenditure of large sums of public money. The gross cost of the health and welfare services of the Health Committee in the financial year 1959/60 was £2,295,431, and if the cost of the School Health Service, £426,469 provided by the Education Committee, is added the total expenditure of the County Council on health and welfare services amounted to £2,721,900. Naturally and understandably, those who write and speak about health and welfare services, whether provided on a national or local basis, will very properly point to the benefits that derive from the large sums of money spent. Indeed, it is an essential part of any organisation dealing with health services to direct attention, as a form of health education, to the facilities that are available to all members of the community that need them and to the benefits that arise from a proper use of these facilities.

It is, however, necessary to point out that disease will, so far as can be foreseen, remain part of man's struggles in the environment in which he lives. Man's environment continually changes and so do the diseases he encounters but the bacteria and viruses that have caused diseases do not disappear. When there are new discoveries as to the causal organism of some disease or some new and effective form of treatment it is tempting to believe that these are further steps towards a state where man's existence will eventually be free from disease and, apart from accident, all human life will continue to old age. A study of man's history suggests that no such state can be reached and that the challenges to those concerned with the health and welfare services are as great as they ever were, except that the form and direction of these challenges must change as time goes on.

As an immediate issue I would draw attention to the need that still exists to take fuller advantage of some of the Council's services that provide, in association with general practitioners, protection against diseases that, although no longer an ever present danger to large numbers of people, are still potential menaces to the community. It is, for example, pleasing to record the apparent disappearance of diphtheria over recent years yet the organism still exists and it would be wrong to assume that immunisation against the disease is no longer necessary. The fact that poliomyelitis has not assumed serious epidemic form in Kent for the past three years does not mean we can relax our efforts in vaccination against this disease, yet the response of the latest group of persons for whom vaccination has been offered, that is, those between 26 and 40, has been poor, since only 7.24% of those eligible have bothered to seek protection. If we compare the Kent figures for notifications of new cases of



tuberculosis and deaths from the disease for the years 1939 and 1959 we can see the progress made which reflects the increase in well-being and advances in medical care. Thus in 1939 there were 1,538 new cases notified and 793 deaths and in 1959 there were 953 new cases notified and 121 deaths. The fact, however, that the disease did occur in nearly a thousand people and 121 people died from it in Kent during 1959 leaves no room for a facile conclusion that the early eradication of human tuberculosis is in sight. For adolescents in full time education the Council provides facilities for B.C.G. vaccination against tuberculosis but only one-third of those eligible come forward.

The report follows the usual lines in describing each of the services provided by the Health Committee and includes both those arising from duties under the National Health Service and National Assistance Acts. In general, the services provided were on the lines of those of the previous year and in the majority of instances increased use was made of them.

Considerable preparatory work was done during the year to prepare for the introduction of the Mental Health Act, which comes into full operation on November 1st, 1960, and which will increase the responsibilities of the Health Committee, not only in the extension of domiciliary services but also in the provision of residential accommodation for certain groups of mentally disordered people.

A study of the report will show the diversity of services provided and I would particularly draw attention to the new provision which is being made, and which will require considerable development, for the welfare of the physically handicapped. The arrangements made under the National Assistance Act for the welfare of the handicapped have, in the past, dealt mainly with the blind, partially-sighted and deaf or dumb, but an extension has now been made to include facilities for persons suffering from severe and substantial handicaps to engage in handicrafts in their own homes or at centres. So far as work in centres is concerned, the initial arrangements provide for financial assistance to the British Red Cross Society and other voluntary organisations who provide club and handicraft facilities for handicapped persons, leaving the Council to provide direct services to handicapped persons who are housebound. There is no doubt that whilst this group of persons is relatively small in relation to the total population, the commencement of services to help them in their own homes will, as the years go by, bring welcome relief and assistance.

During the year the Council also took a decision to introduce a chiropody service for old people, the physically handicapped and expectant mothers and decided to provide this service itself by the engagement of chiropodists working in their own surgeries or in County clinics. The service commenced on the 1st September, 1960, and will be described in detail in the next annual report.

I would like once again to say how much I appreciate the kindness and consideration given to the staff of the Health Department by Members of the Council and I would wish to place on record my own appreciation of the loyal and zealous services of members of the staff.

A. ELLIOTT,

*County Medical Officer.*

# ANNUAL REPORT

## Vital Statistics

**POPULATION.**—The Registrar-General's estimate of the population of the Administrative County at the middle of 1959 was 1,636,000: and this population is the basis of the rates quoted in this Report. Table 1 at the end of the Report shows the population in each area in the County: and from that Table it will be seen that 1,283,000 persons were resident in the urban areas, and 353,000 in the rural districts. The increase in the population of the County was 12,000 as compared with an increase of 10,200 in the previous year.

These figures give densities of population of 1.67 per acre in the county as a whole: and 6.67 per acre in the towns and 0.45 per acre in the rural districts. Compared with the previous year, there is little change in any of these figures, and the densities show the same wide range. In the towns, the extremes were 33.34 in *Penge Urban* and 0.26 in *Lydd Borough*, and in the rural districts 1.47 in *Dartford Rural* and 0.13 in *Romney Marsh Rural*.

The following tabulation shows the populations, together with the percentages in urban and rural districts in Kent, for the census years 1921, 1931 and 1951, and the Registrar-General's estimates for 1941 and 1959.

	Population									
	1921		1931		1941		1951		1959	
	No.	%	No.	%	No.	%	No.	%	No.	%
Urban Districts ..	795,035	71.11	847,090	71.50	882,900	75.56	1,225,800	79.12	1,283,000	78.42
Rural Districts ..	323,094	28.89	337,720	28.50	285,500	24.44	323,560	20.88	353,000	21.58
County .. ..	1,118,129	100	1,184,810	100	1,168,400	100	1,549,360	100	1,636,000	100

**BIRTHS.**—The births of living children, registered during 1959, totalled 25,574, an increase of 385 on the total for the previous year. Male births numbered 13,138, female births 12,436.

The crude\* birth-rates for the year were 15.38 (comparable rate† 15.69) in the urban districts, 16.55 (comparable rate 17.38) in the rural districts, and 15.63 (comparable rate 16.10) in the County as a whole. The figure for England and Wales was 16.5 (Provisional).

The following tabulation shows the live-birth, still-birth, and death-rates, divided into urban and rural districts for the whole County. The rates for England and Wales are added for comparison.

In all cases in this report the two years, 1938, the last normal year before the war, and 1958, have been taken for comparative purposes.

	No. of Live Births per 1,000 Home Population			No. of Still-Births per 1,000 Total (Live and Still) Births			No. of Deaths under 1 year of age per 1,000 Live Births		
	1938	1958	1959	1938	1958	1959	1938	1958	1959
Urban District .. ..	15.1	15.41	15.38	33.6	18.87	19.72	42.3	20.35	18.19
Rural District .. ..	14.4	15.87	16.55	36.5	19.31	17.33	45.0	18.97	18.32
Whole County .. ..	14.9	15.51	15.63	34.2	18.97	19.18	42.8	20.05	18.22
England and Wales.. ..	15.1	16.4	16.5	38.3	21.6	21.00	52.8	22.5	22.2

The number of births, and the birth rates, in each sanitary district of the County, are set out in Table 2 at the end of this report.

The excess of births over deaths was 6,482—3,527 males and 2,955 females: and the varying margin of this excess of births over deaths for the years 1938, 1958 and 1959 is shown below:—

	Male	Female	Total
1938 ..	3,146	2,645	5,791
1958 ..	3,235	2,702	5,937
1959 ..	3,527	2,955	6,482

The sex-ratio of the births, on the figures shown above, represents a proportion of slightly less than 106 males to 100 females.

\* Crude birth- and death-rates are the number of births or deaths per 1,000 of the population.

† For explanation see page 40.



**STILL-BIRTHS.**—The number of still-births recorded during the year was 500. This number represents a proportion of 19·18 per thousand of all births in the County, as against 18·97 in the previous year.

The *rate* of still-births (per thousand of the population) was 0·31 in urban and 0·29 in rural districts, and 0·31 in the County as a whole. This proportion may be compared with the rate for England and Wales, 0·35.

The number of still-births in each sanitary district of the County is shown in Table 2 at the end of this report.

**INFANTILE MORTALITY.**—There were 466 deaths of infants under one year of age in Kent during the year, which represents an infantile mortality rate (number of deaths among children under one year of age per thousand live births) of 18·22, as compared with 20·05 in the preceding year. The infantile mortality rate per 1,000 legitimate births is 18·13 and per 1,000 illegitimate births is 20·18.

These deaths of infants formed 2·44 per cent. of the total deaths at all ages (2·62 per cent. in 1958).

**NEO-NATAL MORTALITY.**—There were 354 deaths of infants under four weeks of age during the year, which represents a neo-natal mortality rate (number of deaths among children under four weeks of age per thousand related live births) of 13·84.

Of the 25,574 births in the County, 1,140 were illegitimate, being 4·46 per cent. of the total.

**MATERNAL MORTALITY.**—There were 7 maternal deaths (including abortion) which represents a maternal mortality rate (maternal deaths per 1,000 total births), of 0·27.

The rates in the different sanitary districts will be found in Table 2 at the end of this report; and Table 7 shows the causes of death in children under one year of age, for the years 1938, 1958 and 1959.

**DEATHS.**—The number of deaths registered in the County (i.e. the number of deaths of persons resident in Kent) during 1959 was 19,092—a decrease of 160 on the total for the previous year. Male deaths totalled 9,611, female deaths 9,481.

Crude death-rates were 11·59 for the urban areas, 11·98 for the rural districts, and 11·67 for the whole County.

The following tabulation shows the crude death-rates recorded in Kent during 1938, 1958 and 1959. The rates for England and Wales are added for comparative purposes.

	1938	1958	1959
Urban Districts .. .. .	10·6	11·79	11·59
Rural Districts .. .. .	11·4	12·08	11·98
Whole County .. .. .	10·8	11·85	11·67
England and Wales.. .. .	11·6	11·7	11·6*

\* Provisional.

The number of deaths in each sanitary district, and the deaths in age-groups, and by cause, are shown in Tables 5, 6 and 8 at the end of this report.

The causes of death in order of importance show little variation from year to year, and the following table shows the order of the principal causes in the three years, 1938, 1958 and 1959, the number of deaths under each heading, the death-rate, and the percentage of each group to the total number of deaths from all causes:—

Cause of death	1938			1958			1959		
	Number of deaths	No. of deaths per 1,000 population	Percentage to the total number of deaths from all causes	Number of deaths	No. of deaths per 1,000 population	Percentage to the total number of deaths from all causes	Number of deaths	No. of deaths per 1,000 population	Percentage to the total number of deaths from all causes
Heart Disease .. .. .	4,144	2·99	27·86	6,491	4·00	33·72	6,221	3·80	32·58
Cancer (all sites) .. .. .	2,368	1·71	15·92	3,413	2·10	17·73	3,639	2·22	19·06
Pneumonia .. .. .	727	0·52	4·89	1,078	0·66	5·60	1,056	0·65	5·53
Diseases of circulatory system (other than Heart Disease) .. .. .	817	0·59	5·49	961	0·59	4·99	956	0·58	5·01
Bronchitis .. .. .	358	0·26	2·41	940	0·58	4·88	935	0·57	4·90
Violence (all forms) .. .. .	699	0·50	4·70	819	0·50	4·25	705	0·43	3·69
Ulcer (Stomach and Duodenum) .. .. .	156	0·11	1·05	204	0·13	1·06	179	0·11	0·94
Tuberculosis (all forms) .. .. .	778	0·56	5·23	149	0·09	0·69	121	0·07	0·63
Nephritis .. .. .	370	0·27	2·49	165	0·10	0·86	153	0·09	0·80
Diabetes .. .. .	201	0·15	1·35	118	0·07	0·61	117	0·07	0·61
Gastritis, Enteritis & Diarrhoea .. .. .	87	0·06	0·58	74	0·05	0·38	75	0·05	0·39
Influenza .. .. .	175	0·13	1·18	97	0·06	0·50	247	0·15	1·29
TOTALS .. .. .	10,880	7·85	73·14	14,509	8·93	75·36	14,404	8·80	75·45

There was a small decrease in the proportion of deaths in the age groups under 1 year (0.2%), 15 to under 45 years (0.2%) and 65 years and over (0.4%). There was a slight increase in the proportion of deaths in the age group 5 to under 15 years (0.1%) and 45 to under 65 years (0.7%). It will be seen that in the last 20 years there has been a marked decline in each of the age groups under 65 years with a corresponding rise in the 65 years and over group (16.4%).

In the following summary the deaths in age-groups are expressed as percentages of the total deaths:—

Year	Percentage of Total Deaths Age-Group						Total
	Under 1 year	1 to under 5	5 to under 15	15 to under 45	45 to under 65	65 years and over	
1938	5.9	1.7	1.7	11.4	23.9	55.4	100.0
1958	2.6	0.4	0.4	4.0	20.4	72.2	100.0
1959	2.4	0.4	0.5	3.8	21.1	71.8	100.0

### NOTIFIABLE INFECTIOUS DISEASES

The number of notifications of infectious diseases in each of the sanitary districts in Kent is shown in Table 3 at the end of this report.

A summary of the notifications, incidence-rates, deaths and death-rates of the principal infectious diseases in the County is shown in Table 4 at the end of this report.

**SMALLPOX.**—Once again no cases occurred during the year. It is now thirteen years since the last case was notified.

**SCARLET FEVER.**—There was a considerable increase in the number of cases (1958—1,307, 1959—1,977). It is twelve years since there was a death from the disease.

**DIPHTHERIA.**—No cases of diphtheria were reported; it is now six years since a case occurred in a child under 15 years of age.

**ENTERIC FEVER.**—A slight increase in the number of cases, 23 as against 17 in 1958.

**MEASLES.**—A considerable increase in the number of cases reported last year, 21,214 as against 8,294 in 1958. Five deaths occurred, all were children under 15 years of age.

**WHOOPIING COUGH.**—Almost the same number of cases notified as last year, 1,694 as against 1,689 in 1958. One death occurred of a child under the age of 5.

**POLIOMYELITIS AND POLIOENCEPHALITIS.**—Once again very few cases notified, 19 as against 40 in 1958. The division between paralytic and non-paralytic cases being 13 to 6. There were two deaths.

**OPHTHALMIA NEONATORUM.**—Almost the same number of cases reported as last year, 10 as against 11 in 1958.

**MALIGNANT NEOPLASM.**—Once again there was an increase in the number of deaths, the total being 3,639 as against 3,413 in 1958. (19.06% of the recorded total of deaths from all causes). The mortality rate of 2.22 per thousand of the population is 0.12 higher than in 1958.

The following tabulation shows the mortality from cancer recorded in Kent during the years 1938, 1958 and 1959:—

KENT	1938	1958	1959
URBAN			
No. of Deaths .. ..	1,889	2,711	2,854
Death-rate .. ..	1.72	2.13	2.22
RURAL			
No. of Deaths .. ..	479	702	785
Death-rate .. ..	1.70	2.01	2.22
TOTAL			
No. of Deaths .. ..	2,368	3,413	3,639
Death-rate .. ..	1.71	2.10	2.22

There was a further increase of 226 in deaths from cancer; 169 more males and 57 more females. The increase in the deaths was in each of the age groups 1 to under 5, 5 to under 15, 15 to under 45, 45 to under 65 years and 65 years and over. The percentage of the total number of deaths from all causes decreased by 0.15 to 17.88.



The age-sex distribution of the deaths is shown below, and for comparison there is added the years 1938 and 1958.

	All ages	Per-centage	Under 1	1 to under 5	5 to under 15	15 to under 45	45 to under 65	65 and over
1938 M.	1,095	46.2	—	2	—	56	427	610
F.	1,273	53.8	1	2	—	99	490	681
TOTAL ..	2,368	100.0	1	4	—	155	917	1,291
1958 M.	1,750	51.27	—	3	6	64	633	1,044
F.	1,663	48.73	1	3	4	101	568	986
TOTAL ..	3,413	100.00	1	6	10	165	1,201	2,030
1959 M.	1,919	52.73	—	3	4	82	693	1,137
F.	1,720	47.27	1	5	7	99	566	1,042
TOTAL ..	3,639	100.00	1	8	11	181	1,259	2,179

### DIPHTHERIA IMMUNISATION

For the sixth year in succession no case of diphtheria occurred in the County in a child under the age of 15 years. Whilst it is to be regretted, it is nevertheless not surprising in view of the absence of this disease, to have to record that there was a further drop in the percentage of children under the age of 15 years who were immunised as at the 31st December, the percentage being 47.2 as against 50.2 in 1958.

The following table shows the notifications and deaths for Kent and England and Wales since 1947:—

Year	Deaths		Corrected Notifications	
	Kent	England and Wales	Kent	England and Wales
1947	11	—	117	—
1948	1	156	52	3,575
1949	1	84	29	1,890
1950	3	49	16	962
1951	1	33	5	664
1952	1	32	4	376
1953	—	23	2	266
1954	—	9	1	173
1955	—	13	—	169
1956	—	8	—	63
1957	—	6	1	40
1958	—	8	—	79
1959	—	—	—	103

The following table shows the number of children under the age of 15 years at 31st December, 1959, who at any time prior to that date received a course of immunisation:—

Age on 31.12.1959 (i.e. born in year)	Under 1 1959	1 to 4 1955–1958	5 to 9 1950–1954	10 to 14 1945–1949	Under 15 Total
A. Number of children whose last course (primary or booster) was completed in the period 1955–1959 .. .. .	4,150	62,906	71,623	39,325	178,004
B. Number of children whose last course (primary or booster) was completed in the period 1954 or earlier .. .. .	—	—	43,829	65,594	109,423
C. Estimated mid-year child population .. .. .	25,000	97,600	254,900		377,500
Immunity Index 100A/C .. ..	16.6	64.5	43.5		47.2

The Immunity Index on the last line of the table represents the true percentage of immunisation in the County, or in other words, children who have had a completed course of injections during the last five years. Since 1956 the Immunity Index of children under one year of age has shown a steady rise from 9.3 to 16.6 in 1959, and the reason for this is probably due to the increasing number of young children being immunised by their own doctors with triple antigen. The other two age groups 1-4 and 5-14 have again shown a decline, the former by 0.2 and the latter group by 4.8, and there was a further decline of 3.0 in the total of all children under the age of 15 years. The decline in the older age group and in the total is probably as a result of the continuation of the policy to stop offering, as a routine, a second reinforcing injection to children aged about 9 or 10 years.

The same facilities for immunisation were available at all child welfare centres, doctors' surgeries and schools. Personal persuasion by doctors, midwives and health visitors has again been relied upon more than paper and poster publicity.

The following table shows the number of children who received a course of immunisation during 1959. There was an increase of 826 in the number of children who received a primary injection and a decrease of 506 in the number of children who received a reinforcing injection. It should be pointed out that these figures are only based on actual records received and can, therefore, be regarded as a minimum:—

Year of birth	1959	1958	1957	1956	1955	1954	1953	1952	1951	1950	1949	1948	1947	1946	1945	Total
Primary ..	4,150	11,976	1,838	550	294	339	251	151	126	79	66	34	17	17	8	19,896
Reinforcing	—	—	75	157	751	5,554	2,223	755	341	302	326	188	90	49	53	10,864

The following table shows the division between immunisations carried out by general practitioners and those carried out under County Council arrangements at clinics and schools in 1959:—

<i>Children aged</i>	<i>Immunisation at Clinics</i>		<i>Immunisation at Schools</i>		<i>Immunisation by G.P.s</i>	
	Primary	Booster	Primary	Booster	Primary	Booster
Under 5 years .. ..	8,580	439	32	36	10,196	508
Over 5 years and under 15	422	4,279	267	1,194	399	4,376
Totals .. .. .	9,002	4,718	299	1,230	10,595	4,884

### VACCINATION AGAINST SMALLPOX

During the year, 18,265 persons were vaccinated against smallpox by their own general practitioners or at child welfare clinics. Of this number 14,694 were children under one year of age (1958—13,302), and once again a greater percentage of them were vaccinated by general practitioners, the proportion being 9,709 to 8,556.

One case of generalised vaccinia was reported during the year.

The following table shows the number of persons vaccinated during the year in age groups:—

Age at date of Vaccination	Under 1	1 to 4	5 to 14	15 and over	Total
No. vaccinated (1) ..	14,694	1,278	429	529	16,930
No. re-vaccinated (2) ..	—	141	285	909	1,335
TOTALS .. .. .	14,694	1,419	714	1,438	18,265
General Practitioners (1)	6,874 (46.78%)	788 (55.53%)	651 (91.18%)	1,396 (97.08%)	9,709 (53.16%)
Clinics and others (2) and (3) .. .. .	7,820 (53.22%)	631 (44.47%)	63 (8.82%)	42 (2.92%)	8,556 (46.84%)
TOTALS .. .. .	14,694 (100.00%)	1,419 (100.00%)	714 (100.00%)	1,438 (100.00%)	18,265 (100.00%)



The following table shows, for purposes of comparison, the number of children under one year of age, who have been vaccinated each year since 1950:—

Birth Year	Number of Live Births	Vaccinated During Year	Number Vaccinated	Percentage of Live Births	Total No. Vaccinated	Percentage of Live Births
1950	22,909	1950 1951	7,945 5,292	34.68% 23.10%	13,237	57.78%
1951	23,002	1951 1952	8,322 5,108	36.18% 22.21%	13,430	58.39%
1952	22,707	1952 1953	8,211 5,183	36.16% 22.82%	13,394	58.98%
1953	23,078	1953 1954	8,366 5,479	36.25% 23.73%	13,845	59.98%
1954	22,879	1954 1955	8,529 5,438	37.28% 23.77%	13,967	61.05%
1955	22,545	1955 1956	8,519 5,888	37.79% 26.12%	14,407	63.90%
1956	23,318	1956 1957	8,963 6,279	38.44% 26.93%	15,242	65.37%
1957	24,693	1957 1958	8,200 6,540	33.20% 26.49%	14,740	59.69%
1958	25,189	1958 1959	7,028 7,971	27.90% 31.64%	14,999	59.55%
1959	25,574	1959	7,396	28.92%		

As will be seen from this table, since 1950 the number of live births each year has gradually increased and until 1957 the percentage of infants under one year of age had also shown a steady increase from 57.78% to 65.37%, but in the last two years there has been a decline of 5.82% to 59.55%. This could be due to poliomyelitis vaccination which is started when a child reaches the age of six months. In the first year of life a child can be given injections against diphtheria, whooping cough and poliomyelitis and be vaccinated against smallpox. In view of this, it may be some parents have decided not to have their children vaccinated against smallpox, the disease which is less known now in this country, and so cut down on the number of injections. Despite this drop, however, the figure compares very favourably with that for the whole country. This position has been reached primarily as a result of the personal persuasion of doctors, health visitors and midwives.

The following table shows the division between vaccinations carried out by general practitioners and those carried out under County Council arrangements during 1959.

	Under 1 year	1 to 4 years	5 to 14 years	15 and over
Vaccinations by G.P.s .. .. .	6,874	788	651	1,396
Vaccinations by A.C.M.O.s .. .. .	7,820	631	63	42

Total number of children under five vaccinated by general practitioners .. .. . 7,662—47.55% of total

Total number of children under five vaccinated by Assistant County Medical Officers .. .. . 8,451—52.45% of total

#### VACCINATION AGAINST POLIOMYELITIS

No further extensions to the scheme for vaccination against poliomyelitis were announced during the year and it can, therefore, be said that for the most part it was a year of encouragement and persuasion, particularly as far as the persons included in the last extension were concerned, i.e., those born from 1933 to 1942.

Two main points emerged at the end of the year; the first and probably the most important, was the very small number of cases which occurred, 19, of which 13 were paralytic; there were two deaths. Whilst it would be tempting to regard this total, one of the smallest ever recorded, as an immediate and direct proof of the value of vaccination against the disease it must be borne in mind that there have been wide variations in the number of cases from year to year in the past, and a real assessment of the value of vaccination, particularly as to long-term protection, requires a study spread over a number of years. Up until the end of the first quarter of 1959 only 8.58 % of the eligible persons in the age group born from 1933 to 1942 had been vaccinated but following the death from poliomyelitis of a well-known footballer, which received considerable publicity, over 20 % (40,288) of this age group came forward for vaccination, necessitating extra special clinics being held throughout the County. This also had an effect on the parents of children in the 1959-1943 age group for 30,794 children attended during the same period.

The position by the end of the year was more favourable, particularly where the younger age group was concerned, for 81.76 % of those eligible had had two injections and 80.58 % of those had had three injections. As far as the older group was concerned 38.83 % had had two injections and 40.31 % of those had had three injections. Approximately 40 % of the expectant mothers were also vaccinated, representing a total of 10,231.

Once again British vaccine was supplemented by vaccine from Canada and America, and, for the first time, also a supply of penicillin-free vaccine was made available for a very small number of persons who were sensitive to this anti-biotic.

The following tables give details of injections carried out during the year and the number of notifications and deaths from poliomyelitis during the last ten years:—

Age Group	Born 1943/1959	Born 1933/1942	Expectant Mothers	Others	Total
Two Injections .. ..	73,856	68,708	10,231	917	153,712
Third Injection .. ..	217,354	23,903	5,408	1,145	247,810

Year	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959
Notifications—Paralytic .. ..	149	88	135	146	40	170	63	217	29	13
Non-Paralytic .. ..	132	87	43	61	23	94	49	163	11	6
Deaths .. .. .	13	13	11	17	6	17	8	19	4	2

### VACCINATION AGAINST WHOOPING COUGH

Facilities for vaccination against whooping cough were provided at all child welfare clinics and by general practitioners.

Towards the end of the year a decision was taken that the use of a separate antigen for protection should be discontinued in favour of a triple vaccine that would provide protection against diphtheria, whooping cough and tetanus. This triple vaccine had been in use for some time by general practitioners and the following table shows the number of children who received protection against whooping cough, including those who also received this protection by the use of triple antigen from their own doctors.

Year of birth	1959	1958	1957	1956	1955	1954	1953	1952	1951	1950	1949	Others	Total
	8,633	10,041	1,239	546	345	295	141	65	50	29	14	61	21,459

The following table gives the numbers of notifications and deaths from whooping cough during the last ten years.

Year	1959	1958	1957	1956	1955	1954	1953	1952	1951	1950
Notifications	1,694	1,689	6,082	4,224	3,672	6,550	6,412	4,054	10,225	4,672
Deaths	1	—	4	2	2	4	7	5	17	7

## PREVENTION OF ILLNESS, CARE AND AFTER-CARE

The various services provided under Section 28 of the National Health Service Act, 1946, have been maintained during the year.

### TUBERCULOSIS NOTIFICATIONS

During the year 953 (1958—1959) persons were notified as suffering from tuberculosis. On the 31st December, 17,497 (1958—1959) persons remained on the registers of medical officers of health. Summaries of notifications will be found on pages 15 and 16.

### PROVISION OF EXTRA FOODS

2,393 recommendations were made by chest physicians, of which 2,290 were approved, the remainder not being approved as, at the time of recommendation, the patients' financial circumstances brought them outside the application of the Council's assessment regulations.

### REHABILITATION

Persons suffering from inactive tuberculosis who are fit enough to undertake five hours' work a day can, on the recommendation of the chest physician, be admitted to rehabilitation units established at Preston Hall, Maidstone; Papworth Hall, Cambridge, and Enham Alamein, Andover. At the end of 1958, 20 were receiving rehabilitation; during 1959, 7 were admitted, 4 discharged and 23 remained at the end of the year.

### BEDS AND BEDDING

44 patients, on the recommendation of chest physicians and general practitioners, were provided, on loan, with beds and bedding during the year.

### KENT COUNCIL OF SOCIAL SERVICE

This Council has continued to afford assistance to patients and their dependants in the form of extra milk, beds and bedding, clothing, holidays, materials for diversional therapy, finding suitable employment, fares to visit patients in sanatoria and hospitals, re-housing and removal expenses. The County Council make an annual grant for administrative expenses only.

### B.C.G. VACCINATION

The carrying out of this vaccination has now been extended to include all persons of 13 years or over who are in full-time attendance at schools and educational establishments as well as persons in close contact with patients suffering from tuberculosis. By the end of the year 10,042 schoolchildren had been vaccinated and 3,180 contacts. The schoolchildren were vaccinated at schools by Assistant County Medical Officers and the contacts by chest physicians at the chest clinics.

### MEANS OF CONTROLLING TUBERCULOSIS

The means of controlling tuberculosis are the same as given in the Annual Report for 1953, when a full description of the measures taken was included.

### ASCERTAINMENT OF CONTACTS

Contacts of persons known to be suffering from tuberculosis are persuaded by the health visitors to attend the chest clinics for examination.

The following table shows the extent of contact examination during the years 1955—1959:—

Year	1955	1956	1957	1958	1959	Total
Number notified as suffering from tuberculosis ..	1,188	1,225	1,135	987	953	5,488
Number of contacts examined .. .. .	7,862	12,491	10,876	9,764	13,869	54,862
Number found to be tuberculous .. .. .	93	130	84	79	83	469

### EMPLOYMENT OF PERSONS KNOWN TO BE SUFFERING FROM TUBERCULOSIS

Sputum positive cases are not generally encouraged to return to work but if they do, every precaution is taken to ensure that there is no spread of infection. Where the previous employment is not considered suitable, the Disablement Resettlement Officer of the Ministry of Labour, endeavours to find alternative employment or in certain cases the patient will undertake a course of training for work suitable to his condition.



## ILLNESSES GENERALLY RECUPERATIVE CARE

The following table shows the extent of recuperative care provided during the year:—

				No. of Persons Admitted	Total Weeks	Average Stay	
						Weeks	Days
Adults	..	..	Male	34	75.0	2	1
			Female	113	238.2	2	1
School Children	..	..	Male	7	27.2	3	6
			Female	5	17.5	3	4
Children under 5 years of age			Male	1	5.6	5	6
			Female	1	6.0	6	—
Mother and Baby	..	..	..	5	11.6	2	3
TOTALS				166	382.0	3	2

Recuperative residential care is provided under Sections 22 and 28 of the Act. This is restricted to instances where a person has suffered from an illness which has been treated either in a hospital or at home and whilst needing further medical and/or nursing care of the type that can be provided by a general practitioner and home nurse, cannot have that care at home.

It may be of interest to note that 229 applications for recuperative care were received of which 166 were accepted. The other 63 cases were either withdrawn before going away, or were found to be outside the scheme approved by the County Council.

### NURSING REQUISITES

The British Red Cross Society and St. John Ambulance Brigade, as agents of the County Council, continued to provide from their depots nursing requisites to persons ill at home. The County Council also supplied on loan lifting hoists to twenty-six patients and various other forms of home nursing equipment.

### BEDS AND BEDDING

118 persons were provided with beds and bedding during the year. *Paraplegics*—a hospital-type bed, lifting pole and handle, together with such special nursing equipment as may be recommended by the hospital concerned is provided for persons suffering from paraplegia.

### VENEREAL DISEASE

The two female Social Workers carried out the following visits in connexion with their duties in tracing contacts and following up persons who have not maintained attendance at clinics:

Number of persons visited	..	..	..	541
Number who attended for treatment			..	405

### HEALTH EDUCATION

The services of a health education lecturer, on a part-time basis, were maintained during the year. Lectures were given at 118 meetings of various organisations on different aspects of health education covering social hygiene, including venereal disease and other associated problems as well as sex education; also aspects of physical education, general physical fitness, food handling and prevention of contamination; immunisation against diphtheria and vaccination against smallpox, poliomyelitis and whooping cough, smoking and lung cancer, control of infectious diseases and local health services.

## ORTHOPAEDIC SERVICES

The arrangements made for the treatment of children suffering from Orthopaedic defects continued to operate during the year.

In 1959 there were 28,987 attendances at the non-hospital clinics compared with 25,645 attendances during 1958. Of the former figure 94.9% were children in attendance at maintained schools and 5.1% children under school age.



## SUPPLEMENTAL RETURN

Showing new notifications of Tuberculosis coming to the knowledge of the Medical Officer of Health during the period, 1st January, 1959, to the 31st December, 1959, *otherwise* than by formal notification.

Public Health (Tuberculosis) Regulations, 1952.

Source of Information	Number of cases in Age Groups													Total
	0 to 1	1 to 2	2 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 & up-wards	
Death Returns from local Registrars	Respiratory	M.	—	—	—	—	—	—	1	1	5	4	1	12 (A)
		F.	—	—	—	—	—	—	—	2	—	—	—	3 (B)
	Non-Respiratory	M.	—	—	—	—	—	—	—	—	—	—	—	— (C)
		F.	—	—	—	—	—	—	—	—	—	1	—	1 (D)
Death Returns from Registrar-General (Transferable Deaths)	Respiratory	M.	—	—	—	—	—	—	—	—	—	—	—	— (A)
		F.	—	—	—	—	—	—	—	—	—	—	—	— (B)
	Non-Respiratory	M.	—	—	—	—	—	—	—	—	—	—	—	— (C)
		F.	—	—	—	—	—	—	—	—	—	—	—	— (D)
Posthumous Notifications	Respiratory	M.	—	—	—	—	—	—	—	—	1	—	1	2 (A)
		F.	—	—	—	—	—	—	—	1	—	1	—	4 (B)
	Non-Respiratory	M.	—	—	—	—	—	—	—	—	—	—	—	— (C)
		F.	—	—	—	—	—	—	—	—	—	—	—	— (D)
Totals		.. (A) 14, (B) 7, (C) —, (D) 1.												

Particulars of primary notifications of new cases of tuberculosis, and of deaths from the disease, in Kent during 1959:—

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1 .. ..	1	3	—	—	—	—	—	—
1—2 .. ..	2	3	—	—	}	—	—	—
2—5 .. ..	8	11	2	—		—	—	1
5—10 .. ..	9	4	5	1	}	—	—	—
10—15 .. ..	8	6	4	4		—	—	—
15—20 .. ..	22	26	9	6	}	—	—	—
20—25 .. ..	38	33	2	7		—	1	—
25—35 .. ..	81	67	12	14	}	15	2	—
35—45 .. ..	73	63	8	3		—	—	2
45—55 .. ..	84	39	3	8	}	36	12	2
55—65 .. ..	105	23	7	—		—	2	1
65—75 .. ..	50	17	1	3	20	6	1	—
75 and upwards ..	17	12	1	3	9	9	1	3
TOTALS .. ..	498	307	54	49	80	29	5	7
	908				121			

### CARE OF MOTHERS AND YOUNG CHILDREN

The main features of the Council's scheme for the care of mothers and young children remained as in previous years.

#### NOTIFICATION OF BIRTHS UNDER THE PUBLIC HEALTH ACT, 1936

The following analysis of all births notified during 1959 shows the place of confinement:—

Number of Births	Place of Confinement		
	Domiciliary	Hospital	Nursing Home
25,765	9,766	15,113	886
	(37·9%)	(58·66%)	(3·44%)

The adjusted totals of notifications received during the year, i.e., the deduction of those births occurring within the County but relating to non-County residents, and the addition of those births occurring outside the County but relating to Kent residents, gives the following result:—

			Domiciliary	Institutional	Total
Live births .. ..			9,654	15,692	25,346
Still births .. ..			92	379	471
TOTALS .. ..			9,746	16,071	25,817

#### CHILD WELFARE CENTRES

At the end of the year there were 285 child welfare centres and 57 ante-natal and post-natal clinics in the County. 217 of these were staffed by general medical practitioners and the remainder by the Council's medical staff. The total attendances at child welfare centres during the year were 480,084 covering 64,445 children; of these 19,794 under one year of age attended for the first time during the year. At ante-natal and post-natal clinics there were 5,454 first attendances and 21,118 subsequent attendances.

## SPECIAL CARE OF PREMATURE INFANTS

During the year notifications were received of 1,552 babies who weighed  $5\frac{1}{2}$  lbs. or less at birth. Details of these are given in the following tabulation from which it will be seen that 1,128 were born in hospital and 25 in nursing homes. The remaining 399 were born at home, although 82 were subsequently transferred to hospital.

Notifications were received relating to 236 premature still-births, and details of these are also given in the following table:—

Weight at Birth  (1)	PREMATURE LIVE BIRTHS															PREMATURE STILL-BIRTHS		
	*Born in hospital			Born at home and nursed entirely at home			Born at home and transferred to hospital on or before 28th day			Born in nursing home and nursed entirely there			Born in nursing home and transferred to hospital on or before 28th day			Born in hospital	Born at home	Born in nursing home
	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days	Total	Died within 24 hrs. of birth	Survived 28 days			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
(a) 3 lb. 4 oz. or less (1,500 gms. or less)	135	59	50	6	1	4	20	13	2	3	1	2	—	—	—	95	14	—
(b) Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 gms.)	212	20	170	23	1	22	30	7	22	1	—	1	1	—	1	55	8	1
(c) Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000-2,250 gms.)	231	10	211	42	—	42	17	—	13	4	—	4	1	—	—	18	3	—
(d) Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 gms.)	550	9	533	246	2	244	15	4	8	15	—	16	—	—	—	30	12	—
TOTALS .. ..	1128	98	964	317	4	312	82	24	45	23	1	23	2	—	1	198	37	1

\* The group under this heading includes babies who were born in one hospital and transferred to another.

## CARE OF ILLEGITIMATE CHILDREN

The main provision for the institutional care of unmarried mothers and their babies is through voluntary organisations, usually at homes administered by the Canterbury and Rochester Diocesan Councils for Moral Welfare. During the year there were 120 admissions at the request of the Council to voluntary homes.

The Council's Mother and Baby Home, which has twenty-two beds and fourteen cots, admitted 113 patients during the year, and these included a number who would not normally be accepted in the Diocesan Homes because of previous pregnancies or other considerations. Special arrangements needed to be made for the future care of some of these women and their babies, and there continued to be a close association between the officers of the Council and the workers of the voluntary organisations.

## HEALTH VISITING

The approved establishment of health visitors remains at 275, but the numbers employed at the end of the year were 240 whole-time and 9 part-time. The majority of the health visitors are engaged on combined duties, e.g., care of mothers and children and the School Health Service. The work of tuberculosis home visiting continues to be carried out by health visitors who also attend the Chest Clinics. In certain parts of the County the health visitors also act as Assistant Mental Health Officers as described in the Mental Health Section of this report.



The number of children under five years of age visited during the year totalled 112,436. First visits were paid during the year to 3,547 expectant mothers and to 28,433 children under one year of age. The number of families or households visited during the year was 85,505 and the total number of visits paid by health visitors was as follows:—

To expectant mothers	..	..	..	..	..	6,198
To children under 1 year	..	..	..	..	..	156,530
To children aged 1 and under 2 years	..	..	..	..	..	103,082
To children aged 2 and under 5 years	..	..	..	..	..	137,840
To patients with tuberculosis	..	..	..	..	..	33,480
Other visits (hospital care, care of old people, etc.)	..	..	..	..	..	27,992
TOTAL VISITS						465,122

#### NURSERIES AND CHILD MINDERS (REGULATION) ACT

At the end of the year 22 premises were registered as nurseries under the Act, with total accommodation for 496 children. There were also 115 registrations of child minders covering a total provision for 890 children. Regular inspections of the premises are carried out by medical officers and health visitors.

#### DENTAL TREATMENT

During the year there was no variation of the arrangements made for the care of mothers and young children apart from the appointment of an additional oral hygienist in September to undertake the work of scaling, cleaning and polishing of teeth. The equivalent of  $1\frac{1}{2}$  whole-time dental surgeons spent 675 half-day sessions to the inspection and treatment of 737 mothers and 1,336 children under school age in 65 permanent clinics and in four mobile caravans visiting rural districts. Details of the work carried out during the year for mothers and young children with comparable figures for 1958 are given in the table below:—

<i>Expectant and Nursing Mothers</i>						
<i>Year</i>			<i>Examined</i>	<i>Needing Treatment</i>	<i>Actually Treated</i>	<i>Made Dentally Fit</i>
1958	..	..	829	810	726	520
1959	..	..	811	779	737	499
<i>Children under School Age</i>						
1958	..	..	1,538	1,420	1,291	1,176
1959	..	..	1,511	1,436	1,336	1,041

The two oral hygienists working under the direction of the dental surgeon at Chatham, Gravesend, Orpington, Sidcup, Welling, Penge, Bromley and St. Paul's Cray, carried out 2,916 scalings and polishing of teeth in 663 half day sessions in addition to those shown in the table below.

TABLE "A"

<i>Expectant and Nursing Mothers</i>					
Number treated	..	..	..	..	737
Number made dentally fit	..	..	..	..	499
Number of attendances	..	..	..	..	3,081
Number of extractions	..	..	..	..	1,757
Number of scalings and gum treatments	..	..	..	..	395
Number of teeth filled	..	..	..	..	845
Number of fillings inserted	..	..	..	..	891
Number of other operations	..	..	..	..	1,380
Number of dentures supplied	..	..	..	..	336
Number of dentures repaired	..	..	..	..	28

TABLE "B"

<i>Children under School Age</i>					
Number treated	..	..	..	..	1,336
Number made dentally fit	..	..	..	..	1,041
Number of attendances	..	..	..	..	2,822
Number of extractions	..	..	..	..	1,297
Number of silver-nitrate treatments	..	..	..	..	505
Number of teeth filled	..	..	..	..	1,127
Number of fillings inserted	..	..	..	..	1,189



## WORKSHOPS

The difficulty of keeping eight technicians fully employed in the Council's workshops in Dover and Maidstone at the end of last year because of the shortage of whole-time staff and the absence of an orthodontic dental surgeon to assist the dental surgeons in their examinations, diagnosis and treatment of school children became easier in July when one senior technician left the service. The vacancy was filled by promotion of a junior technician who was not replaced. The manufacture of artificial dentures and orthodontic appliances for school children and the return of the work in its various stages within a period of two to three weeks from the time of receiving the impressions from the dental surgeons was the same as in the previous year. The arrangements made with the Education Committee in conjunction with the Principal of Maidstone Technical College to use the workshop for a Post-Graduate Course for senior technicians commenced on the 29th September, 1959, and will end on the 9th February, 1960.

Below Table "C" shows the work carried out in the County workshops:—

TABLE "C"						
WORK CARRIED OUT IN COUNTY DENTAL WORKSHOPS						
<i>Mothers and Young Children</i>						
<i>Dentures</i>			<i>Remakes</i>		<i>Repairs</i>	
336			4		28	
<i>School Children</i>						
<i>Orthodontic</i>						<i>Oral</i>
<i>Dentures</i>	<i>Re-makes</i>	<i>Repairs</i>	<i>Appliances</i>	<i>Re-Makes</i>	<i>Repairs</i>	<i>Screens</i>
389	5	78	1,186	6	218	85

## DOMESTIC HELP SERVICE

The figures given below of the various categories of the 14,345 households where service was provided during the year again show a similarity to the service in 1958, which is indicated by the bracketed figures:—

Maternity (lying-in) patients	..	..	..	..	..	1,959	(1,923)
Tuberculosis patients	..	..	..	..	..	176	(198)
Person or persons over 65 years	..	..	..	..	..	9,528	(9,093)
Others, e.g., illness, mental defective, etc.	..	..	..	..	..	2,682	(2,539)
Total households served	..	..	..	..	..	14,345	(13,753)

The average number of helps employed part-time remained at approximately 1,400.

## FAMILY HELP SERVICE

This service, which is administered within the organisation of the domestic help service, received 623 applications in 1959 compared with 564 during 1958. All applications were received from the Children's Officer for temporary help to be provided during the absence of the mother and as an alternative to the children being taken into care by the Children's Committee. Help was provided for 416 families for an average of twenty-six days' service per child and covered the care of 1,493 children. The circumstances calling for the provision of this service were mainly the admission of the mother to hospital for treatment (224) and for confinement or complication in pregnancy (142) or to a convalescent home (7). In thirteen cases the need arose because of the death of the mother and thirty from desertion by the mother.

## CHILD HELP SERVICE

Whilst the details of the Child Help Service were given in my Report for 1957, I think that some description of the structure and objectives of this service should again be set out because it is considered that this is one of the most interesting and valuable of the new services provided by the Committee during recent years.

The Child Help Service provides organised and constructive facilities for the rehabilitation of problem families. There are, of course, many definitions of problem families but, for working purposes, they can be defined as those households where dirt, disintegration and disorder are present to such an extent that the social habits of the family stand out in sharp contrast in the community in which they live.

For many years the Health Visiting Service has worked hard in helping and assisting problem families and it is from this source that the majority of requests for the rehabilitation services still come. More cases are, however, being reported by statutory Housing Authorities, particularly in cases where rent arrears have accumulated and eviction is contemplated or threatened.

There are many reasons why the social levels of certain families are low, but it is important that efforts at rehabilitation should be commenced as soon as there is evidence that the standards of a family are reaching a level where disintegration of family life is beginning to appear and where the process, if unchecked, will adversely affect the welfare of the children.

When a case is reported that appears to merit the attention of the Child Help Service, a meeting is held of the interested workers in order to determine what needs exist that have to be met. A worker specially selected from the Domestic Help Service is then placed in the household to give the mother an intensive course in simple child care, housecraft and budgeting. The helper attends the home daily for three months and during this period the mother is taught methods of cleaning and a routine for daily and weekly cleaning is drawn up by the Organiser to suit the needs of each household. The mother is taught how to do washing regularly and how to wash, dry and iron and store clothing. Clothes are repaired and simple mending taught. Many of the mothers requiring this service are unable to cook and have no knowledge of food values. Diet sheets are drawn up by the Health Visitor and the helpers teach the mothers how to cook simple nourishing meals. The children are taught habits of tidiness and cleanliness and are sent to school punctually and in a clean and tidy condition. Many teachers have commented upon the improved behaviour and appearance of these children from problem homes.

Budgeting in these homes is always poor and there are usually debts and arrears on hire purchase commitments. Every endeavour is made to teach the mother how to budget her income and the helper goes shopping with the mother to teach her how to shop in the cheaper markets.

Most of these households are short of furniture, bedding and domestic equipment and every effort is made in the beginning to supply essential equipment from voluntary sources. As budgeting improves the families are encouraged to buy necessities for the home and to budget for future requirements.

At the end of the three months' service a second meeting of the interested workers—including the helper—is held to assess the results of the service. An improvement at this stage is always shown. In order that the improvement should be maintained, follow-on Child Help Service is provided for up to six hours a week for the following nine months.

During 1959, 44 families commenced the initial service and 29 the follow-up service. The families who had received service in 1957 and 1958 were also kept under review.

An assessment of the results suggests that in 65% of cases the families were rehabilitated to such an extent as to take them out of the problem category.

#### NIGHT ATTENDANT AND EVENING SERVICE

This service, which is provided under Section 28 of the National Health Service Act, 1946, and which is also administered as part of the domestic help service, received 591 applications during the year. In 558 cases, help was provided by the Council, 345 for night service and 213 for evening service. The sources from which these requests for service were received followed the usual pattern, 352 coming from the patients' doctors. 552 cases were terminated during the year mainly because of admission to hospital or to a home (189), improvement (172) or through death (123).

#### MIDWIFERY AND DISTRICT NURSING SERVICES

The staff at the end of the year consisted of 6 administrative midwifery and district nursing officers, 127 whole-time midwives, 180 whole-time district nurses, 129 whole-time district nurse midwives and 22 part-time nurses and midwives.

By arrangement with the East Sussex County Council a small amount of midwifery and district nursing is undertaken in an adjoining part of Kent by one of the East Sussex District Nursing Associations.

## MIDWIFERY SERVICE

In the three following tables, relating to the work of midwives in the County, the corresponding figures for the previous year are shown in brackets for the purpose of comparison.

TABLE 1

The number of midwives practising in the County at 31st December, 1959 and the number of deliveries attended during the year.

						<i>Number of Midwives practising as at 31.12.59</i>	<i>Number of deliveries attended by Midwives during 1959</i>
<i>Domiciliary Midwives</i>							
Midwives and Nurse/Midwives employed by the County							
Council	..	..	..	..	..	257 (255)	9,600 (9,177)
Other Domiciliary Midwives	..	..	..	..	..	10 (13)	79 (80)
TOTALS						267 (268)	9,679 (9,257)
<i>Institutional Midwives</i>							
Midwives employed by Hospital Management Committee	..					250 (284)	12,606 (13,005)
Midwives employed by Voluntary Institutions	..	..				1 (2)	57 (52)
Midwives employed in Private Nursing Homes	..	..				14 (10)	265 (270)
Midwives in Military Families Hospitals	..	..	..			10 (11)	288 (283)
TOTALS						275 (307)	13,216 (13,610)
Totals for all Midwives						542 (575)	22,895 (22,357)

TABLE 2

The number of occasions Medical Aid was sought by midwives during 1959:—

				<i>By Domiciliary Midwives</i>	<i>By Institutional Midwives</i>	<i>Total</i>
For the Mother	..	..	..	2,184 (2,149)	180 (134)	2,264 (2,283)
For the Child	..	..	..	492 (416)	27 (23)	519 (439)

TABLE 3

Details of certain Notifications submitted by midwives in accordance with the Rules of the Central Midwives Board, during 1959:—

				<i>By Domiciliary Midwives</i>	<i>By Institutional Midwives</i>	<i>Totals</i>
Still-birth	..	..	..	73 (56)	47 (45)	120 (101)
Death of Mother	..	..	..	— (1)	1 (1)	1 (2)
Death of Infant	..	..	..	10 (19)	20 (15)	30 (34)
Laying out a dead body	..	..		22 (44)	1 (2)	23 (46)
Liability to be a source of infection	..			21 (18)	— (1)	21 (19)
Adoption of artificial feeding	..			1,135 (864)	2,086 (2,001)	3,221 (2,865)
TOTALS				1,261 (1,002)	2,155 (2,065)	3,416 (3,067)

During the year the Council's midwifery staff made 22,565 visits to 7,963 patients who had been confined in hospital and discharged home before the 14th day of the lying-in period; during the previous year 20,637 visits were made to 7,340 such patients.



## DOMICILIARY AND INSTITUTIONAL CONFINEMENTS

The figures given below show the proportion of institutional and domiciliary births in the County classified according to areas:—

## ANALYSIS OF BIRTHS IN THE ADMINISTRATIVE COUNTY OF KENT

## CLASSIFIED AS TO DOMICILIARY, NURSING HOME AND HOSPITAL

Area showing Main Towns	Population*	Place of Confinement				Total		Percentage		
		D.	N.H.	H.	D.			N.H.	H.	
No. 1. Ashford, Deal, Dover, Folkestone.										
1956	Whole Year	206,320	1,339	207	1,476	3,022	=	44·31	6·85	48·84
1957	„ „	205,840	1,298	236	1,513	3,047	=	42·60	7·74	49·66
1958	„ „	207,690	1,332	251	1,554	3,137	=	42·40	8·00	49·60
1959	„ „	207,070	1,388	252	1,419	3,059	=	45·38	8·23	46·39
No. 2. Thanet Towns, Herne Bay, Whitstable, Sandwich.										
1956	Whole Year	178,640	964	211	1,261	2,436	=	39·57	8·66	51·77
1957	„ „	179,090	1,043	282	1,332	2,657	=	39·26	10·61	50·13
1958	„ „	178,370	1,006	127	1,264	2,397	=	41·90	5·30	52·80
1959	„ „	179,630	1,041	51	1,278	2,370	=	43·93	2·15	53·92
No. 3. Maidstone.										
1956	Whole Year	143,650	1,035	98	1,047	2,180	=	47·47	4·49	48·03
1957	„ „	144,450	1,057	91	1,086	2,234	=	47·32	4·07	48·61
1958	„ „	144,550	1,152	92	1,067	2,311	=	49·85	3·98	46·17
1959	„ „	145,090	1,119	107	1,156	2,382	=	46·97	4·49	48·54
No. 4. Tunbridge Wells, Sevenoaks.										
1956	Whole Year	142,710	554	100	1,279	1,933	=	28·66	5·17	66·17
1957	„ „	143,910	625	73	1,413	2,111	=	29·61	3·46	66·93
1958	„ „	145,530	630	83	1,435	2,148	=	29·32	3·86	66·82
1959	„ „	147,370	744	101	1,473	2,318	=	32·09	4·36	63·55
No. 5. Medway Towns, Faversham, Sittingbourne, Sheerness, Gravesend, Northfleet.										
1956	Whole Year	356,360	2,535	368	2,746	5,649	=	44·88	6·51	48·61
1957	„ „	360,150	2,718	308	2,985	6,011	=	45·22	5·12	49·66
1958	„ „	361,360	2,945	352	2,987	6,284	=	46·86	5·61	47·53
1959	„ „	365,620	2,972	333	3,069	6,374	=	46·63	5·22	48·15
No. 6. Bexley, Crayford, Dartford, Erith.										
1956	Whole Year	249,630	777	18	2,920	3,715	=	20·92	·48	78·60
1957	„ „	253,800	879	9	3,089	3,977	=	22·10	·23	77·67
1958	„ „	257,290	963	21	3,146	4,130	=	23·32	·50	76·18
1959	„ „	260,830	987	14	3,203	4,204	=	23·48	·33	76·19
No. 7. Beckenham, Bromley, Chislehurst, Orpington, Penge.										
1956	Whole Year	323,690	1,140	37	3,519	4,696	=	24·28	·79	74·93
1957	„ „	326,560	1,314	49	3,621	4,984	=	26·36	·98	72·66
1958	„ „	329,210	1,380	38	3,706	5,124	=	26·93	·74	72·33
1959	„ „	330,390	1,512	34	3,564	5,110	=	26·59	·66	69·75
TOTALS:										
1956	Whole Year	1,601,000	8,345	1,039	14,248	23,632	=	35·31	4·40	60·29
1957	„ „	1,613,800	8,934	1,048	15,039	25,021	=	35·70	4·19	60·11
1958	„ „	1,624,000	9,408	964	15,159	25,531	=	36·80	3·80	59·40
1959	„ „	1,636,000	9,763	892	15,162	25,817	=	37·82	3·45	58·73
(D. = Domiciliary. N.H. = Nursing Home. H. = Hospital.)										

\*Registrar-General's Estimates of Population at 30th June.



### INHALATIONAL ANALGESICS

Relief of pain at child-birth can be provided by midwives administering to their patients either a mixture of nitrous oxide and air or a mixture of trichloroethylene and air. The former of these two methods has been in use by County midwives in Kent since 1945; the latter method was first approved by the Central Midwives Board in 1955 as a safe means of procuring analgesia at child-birth by practising midwives. During that year a commencement, on a small scale, was made in the use of trichloroethylene by the Council's midwives who, in 1959, administered it to 2,693 patients, representing an increase of more than 100% over the previous year.

The following figures show the increasing use of inhalational analgesics by domiciliary midwives in Kent.

<i>Year</i>	<i>Approximate percentage of Domiciliary Confinements at which analgesia was administered</i>				
1950	..	..	..	..	63.8
1951	..	..	..	..	66.4
1952	..	..	..	..	72.0
1953	..	..	..	..	76.9
1954	..	..	..	..	79.1
1955	..	..	..	..	83.0
1956	..	..	..	..	83.8
1957	..	..	..	..	87.1
1958	..	..	..	..	86.8
1959	..	..	..	..	87.9

### USE OF PETHIDINE BY MIDWIVES

Midwives may obtain and use on their own authority the drug Pethidine which assists in the relief of pain at childbirth. During 1959 the use of this drug by domiciliary midwives showed a decline from that for the previous two years. The comparative figures, expressed as percentages of the total domiciliary confinements attended by midwives, are:—

1957	1958	1959
47.7%	45.6%	43.3%

### DISTRICT TRAINING OF PUPIL-MIDWIVES

A part of each pupil-midwife's training is received from a domiciliary midwife with whom she works for a period of three months attending patients in their homes. Thirty-three midwives employed by the Council are approved by the Central Midwives Board to provide this district training in conjunction with the following hospitals:—

Pembury Hospital, near Tunbridge Wells  
 All Saints' Hospital, Chatham  
 West Hill Hospital, Dartford  
 Bexley Maternity Hospital, Bexleyheath  
 Kent and Canterbury Hospital, Canterbury

During the year 125 pupil-midwives completed their domiciliary training with County midwives.

The Ministry of Health Circular 8/56 set up machinery for the purpose of sharing amongst County Boroughs and County Councils as Local Health Authorities, the costs of Second Part Midwifery Training of pupil-midwives.

After the costs jointly incurred by the Council and each of the above-mentioned hospitals in training pupils during each financial year has been calculated, a payment is made to each relevant hospital authority of such an amount that results in the Council meeting 40% of the total, as recommended by the Ministry of Health.

### COURSES OF INSTRUCTION FOR MIDWIVES

Section G of the Rules of the Central Midwives Board requires midwives who are in regular practice to attend, at intervals of five years, a residential refresher course which has been approved by the Board. During 1959 arrangements were made for 39 of the Council's midwives and nurse/midwives to attend approved courses organised by the Royal College of Midwives so that they would comply with the Board's Rules.

Arrangements are not made by the Council for the attendance at residential midwifery refreshers of midwives in private or hospital practice. Instead, as part of the Council's function as a local supervising authority, the attention of such midwives, or where appropriate, that of their employing authority, is drawn to the requirements of Section G of the Rules in each case where this appears desirable to safeguard the midwife's right to continue with her practice.

The Council held its twenty-eighth non-residential post-certificate course for practising domiciliary midwives from 27th April to 1st May, 1959, at County Hall, Maidstone, and the many midwives who participated made in all approximately 1,730 attendances.

## RELIEF ARRANGEMENTS

The Council's arrangements for the provision of routine off-duty for the district midwifery staff are designed to allow each district midwife 168 hours—and in the case of a district nurse/midwife, 156 hours—clear of duty each four weeks. These totals of hours off-duty comprise, in the case of the district midwife, 24 hours each week and a week-end of 72 hours—or, as is preferred in some areas, 3 periods of 36 hours and a week-end of 60 hours.

In the case of the nurse/midwife, the off-duty in the four-week period consists of 24 hours each week and a week-end of 60 hours.

The districts are grouped and, to a large extent, the necessary relief to allow for the routine off-duty to be taken is provided by the midwives and nurse/midwives within the group on a reciprocal basis. In some areas it is necessary, however, to employ a group relief who combines providing relief for routine off-duty with other relief work such as for sickness and annual leave.

No fixed "night-call rota" system is operated. In the rural areas such a system would be both unnecessary and impracticable owing to the limited amount of night duty and the distances involved.

In the urban areas where, of course, the amount of night duty occurs more frequently, the midwives for the area relieve each other by a reciprocal arrangement if any of them should have several night calls in succession.

## DISTRICT NURSING SERVICE

At the 31st December, 1959, there were 330 district nurses and district nurse/midwives employed by the Council, including 21 employed part-time only.

The following table shows the number of patients nursed and the number of nursing attendances they received during the year in comparison with the three previous years. These figures show a continuation in the decreases which, in 1958, occurred for the first time since the commencement of the National Health Service.

Individual Patients attended during				Nursing attendances made during			
1956	1957	1958	1959	1956	1957	1958	1959
29,984	28,890	27,298	25,760	830,386	837,786	800,353	755,136

The above table excludes reference to casual visits of a non-nursing nature, which, in 1959, amounted to 17,438, made to patients of all categories.

The following table gives the number of patients attended and the number of nursing attendances received, classified to show the different types of patients dealt with by the nurses during the year. The total of 25,760 patients included 59.9 per cent who were 65 years of age, or over, and the attendances to these elderly patients accounted for 67.7 per cent of the total made to patients of all ages; the corresponding percentages relating to elderly patients for the previous year were, 58.8 and 68.4 respectively.

The table also shows that of the patients of all ages who were attended during the year, 2.2 per cent were infants of five years of age or less as compared with 3.2 per cent for 1958.

	Medical	Surgical	Infectious Diseases	Tuberculosis	Maternal Complications	Others	Totals	Patients included in (2)-(7) who were 65 or over at the time of the first visit during the year	Children included in (2)-(7) who were under 5 at the time of the first visit during the year	Patients included in (2)-(7) who have had more than 24 visits during the year
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
No. of patients attended	23,022	2,169	4	340	213	19	25,767	15,356	576	6,874
No. of Nursing Attendances made by District Nurses	670,731	67,407	18	15,555	1,404	21	755,136	511,809	4 342	546,673

The use of antibiotics in the treatment of a wide range of illnesses means that many patients are visited only for the giving of injections. During 1959, these patients totalled 7,033 and they received 245,846 visits, as compared with the 8,053 patients and 292,682 visits recorded for 1958.

## POST CERTIFICATE TRAINING

From 21st to 25th September, 1959, the Council held at County Hall, Maidstone, its tenth non-residential refresher course for its district nurses, who made approximately 1,500 attendances to the 9 sessions held.

## BLIND PERSONS

The number of registered blind persons in the County at the 31st December, 1959, was 3,322 and the age-sex grouping is:—

Age group				Male	Female	Total	Approx. number of registered blind persons per 10,000 population in respective age groups
Under 1	..	..		2	0	2	2.19
1	..	..	..	1	1	2	
2	..	..	..	3	1	4	
3	..	..	..	3	2	5	
4	..	..	..	0	1	1	
5—10	..	..	..	29	16	45	26.17
11—15	..	..	..	13	16	29	
16—20	..	..	..	19	9	28	
21—29	..	..	..	37	23	60	
30—39	..	..	..	67	57	124	
40—49	..	..	..	102	74	176	
50—59	..	..	..	138	142	280	
60—64	..	..	..	108	136	244	
65—69	..	..	..	119	182	301	
70—79	..	..	..	315	596	911	
80—84	..	..	..	165	336	501	
85—89	..	..	..	115	293	408	
90 and over	..	..	..	31	169	200	
Unknown	..	..	..	0	1	1	
TOTALS	..	..	..	1,267	2,055	3,322	

The following table shows the action taken concerning the examination of persons alleged to be blind during 1959:—

	Number of examinations	Certified Blind		Not certified blind	
		Male	Female	Male	Female
NEW CASES .. ..	493	115	219	61	98
RE-EXAMINATIONS:—					
Previously blind—still blind .. ..	2	2	—	—	—
Previously blind—now not blind .. ..	6	—	—	1	5
Previously not blind—still not blind .. ..	34	—	—	12	22
Previously not blind—now blind .. ..	33	13	20	—	—
TOTALS ..	568	130	239	74	125

## ST. DUNSTANERS

The number of St. Dunstaners registered in this County is 77, of whom 42 are in employment, 33 are unemployable, 1 is unemployed and 1 is receiving training.

## REGISTER OF BLIND PERSONS

The central register of the blind is kept in the Health Department and arrangements have been made to keep the Kent County Association for the Blind informed of action taken concerning blind persons.

The Blind Welfare Services provided are:—

## HOME TEACHERS

There are 15 home teachers who regularly visit the registered blind persons and keep in touch with those who are classed as partially sighted. Their duties include reporting on new cases with a view to registration and teaching Braille, Moon and pastime handicrafts in suitable cases. This pastime work is taught either in the homes of the blind persons, or at special classes when the number attending justifies such arrangement. The home teachers have formed and in some cases attend social clubs where an opportunity is provided for refreshment, education and games. Their duties are arranged to enable them to undertake certain enquiries and services for the Kent County Association for the Blind.

During the past year the home teachers made 18,445 visits, gave 660 lessons in Braille or Moon and 6,370 lessons in pastime handicrafts for blind persons and 1,100 visits, 129 lessons in Braille or Moon and 105 lessons in pastime handicrafts for partially sighted persons.



## WORKSHOP EMPLOYMENT

There were 12 men and 3 women employed in workshops administered by the following Organisations:—

London Association for the Blind  
Blind Employment Factory  
Royal School for the Blind  
Royal London Society for the Blind  
General Welfare of the Blind  
West Ham Municipal Workshops for the Blind

These workshop employees were occupied as follows:—

					<i>Male</i>	<i>Female</i>
Injection moulder	..	..	..	..	1	—
Basket makers	..	..	..	..	4	—
Brush makers	..	..	..	..	*3	—
Mat maker	..	..	..	..	1	—
Machine knitters	..	..	..	..	—	3
Boot repairer	..	..	..	..	1	—
Telephonist	..	..	..	..	1	—
Soap maker	..	..	..	..	1	—
					—	—
TOTAL	..	..	..	..	12	3
					—	—

\* Includes one partially sighted person.

The rates of pay in the workshops are agreed rates fixed through the appropriate negotiating procedure. The workers' actual earnings are augmented by a sum of 15s. a week and additional supplementation as is necessary to bring the earnings plus augmentation up to an agreed minimum wage. The augmentation and supplementation is paid by the Council.

## HOME EMPLOYMENT

Arrangements are made under the Home Workers Scheme whereby blind persons desiring to work on their own account can do so in their homes, at occupation centres or elsewhere other than in special workshops, except that no blind person is allowed to participate in these arrangements unless he is capable of earning such minimum sum each week and for such period as may be determined by the Council.

The earnings of Home Workers are augmented by the County Council. The rates of augmentation range between £3 15s. 0d. for men on net earnings of up to £4 10s. 0d. a week, reducing to 15s. a week on net earnings of £10 8s. 0d. a week and over, with reduced rates for women.

The scheme also provides for payments during sickness, unemployment and holidays, and tests for admission to and retention in the scheme.

At 31st December, 1959, there were 52 persons in the Home Workers Scheme—37 males and 15 females. The trades followed and the number in each, were as follows:—

					<i>Male</i>	<i>Female</i>
Basket makers	..	..	..	..	10	—
Chair seaters	..	..	..	..	*4	—
Hand knitter	..	..	..	..	—	1
Machine knitters	..	..	..	..	—	14
Mat-makers	..	..	..	..	3	—
Mattress-maker	..	..	..	..	1	—
Musician and music teacher	..	..	..	..	1	—
Piano-tuners	..	..	..	..	14	—
Braille copyists	..	..	..	..	2	—
Woodworker	..	..	..	..	2	—

\*Includes one partially-sighted person.

Home Workers are supervised by the Royal National Institute for the Blind, the National Library for the Blind, the Home Teachers and District Officers of the Department and receive assistance in the disposal of their products.

The Department has continued to consult with the Ministry of Labour and National Service regarding suitable training and employment for employable blind persons.

The Service for placement of blind persons in open industry is provided by the Royal National Institute for the Blind on behalf of the County Council.



**FOLLOW-UP OF TREATMENT RECOMMENDED FOR REGISTERED BLIND  
AND PARTIALLY SIGHTED PERSONS**

Number of cases registered during 1959 in respect of whom Section F of forms B.D.8 completed by examining ophthalmologists recommended:—	Cause of Disability				
	Cataract	Glaucoma	Retrolental Fibroplasia	Others	Total
(a) No treatment .. ..	72	36	3	195	306
(b) Treatment:—					
(i) Medical .. ..	13	14	—	64	91
(ii) Surgical .. ..	74	4	—	18	96
(iii) Optical .. ..	6	2	—	22	30
<b>TOTALS ..</b>	<b>165</b>	<b>56</b>	<b>3</b>	<b>299</b>	<b>523</b>
Number of cases at (b) above, which on follow-up action have:—					
Received treatment .. ..	23	6	—	25	54
Commenced and were continuing to receive treatment ..	9	8	—	50	67
Decided to have treatment some time in the future ..	11	3	—	15	29
Been found unfit to undergo treatment .. ..	9	—	—	2	11
Refused treatment .. ..	31	—	—	5	36
Died since recommendation made .. ..	8	1	—	4	13
Left the County before follow-up completed .. ..	2	2	—	3	7
<b>TOTALS ..</b>	<b>93</b>	<b>20</b>	<b>—</b>	<b>104</b>	<b>217</b>

**OPHTHALMIA NEONATORUM**

Two cases of Ophthalmia Neonatorum were notified during the year, but in no instance was there loss or impairment of vision and no case remained under treatment at the end of the year.

**WELFARE SERVICES FOR THE HANDICAPPED**

**HANDICAPPED PERSONS OTHER THAN THE BLIND, PARTIALLY-SIGHTED AND DEAF OR DUMB**

The 21 District Officers of the Health Department are designated as welfare officers for the purpose of securing the general welfare of handicapped persons.

During the year, adaptations were carried out at the homes of 42 persons to secure their greater comfort and convenience.

As stated in my last Annual Report, financial provision was made in the estimates of expenditure for the financial year 1960/61, to enable further services to be provided to assist handicapped persons to engage in handicrafts in their own homes or at centres. Arrangements were accordingly made during the year for the appointment of a craft instructor and he commenced duties in the Maidstone and Cranbrook areas on the 1st September, 1959. After a survey of handicapped persons in those areas who were unfit for open employment, arrangements were made for the County Supplies Officer to purchase at normal trade rates, articles made by handicapped persons which could be issued for use by the various departments of the Council and also for the placing with handicapped persons of outwork involving the production of finished articles such as library book pockets, cushion covers, etc., from materials provided by the Supplies Department. A limited number of handicapped persons were also provided with tools and materials and given instruction in the making of simple costume jewellery, which they dispose of privately.

The Council approved of financial assistance to the British Red Cross Society and other voluntary organisations who provide club and handicraft class facilities for handicapped persons.

A central register is maintained of handicapped persons who apply for and who are assisted under the Council's scheme and at the 31st December, 1959, it comprised the names of 212 persons.

**PERSONS WHO ARE DEAF OR DUMB**

The Canterbury Diocesan Association for the Deaf and the Royal Association in Aid of the Deaf and Dumb act as agents of the County Council for the purpose of providing in their respective areas the services prescribed by the mandatory provisions of the Council's approved scheme for the welfare of the deaf or dumb.

## AMBULANCE SERVICE

The County ambulance service operated from twenty-one ambulance stations until 21st June, 1959, when the number was reduced to nineteen by the opening of a new station at Barnehurst which replaced the former stations at Bexley, Dartford and Erith. There are also six places with telephones which are associated with ambulance stations at which ambulances can be stationed, generally in the day-time. Five of the smaller stations are operated by voluntary associations under agency arrangements, two of them being small country stations manned entirely by volunteers. In addition, a service to cover Canterbury and the adjacent County area is operated from a station in Canterbury by the Canterbury City Council on behalf of itself and the County Council. The Hospital Car Service is used in a few areas to provide supplementary transport for sitting patients.

The County Council has arrangements with neighbouring local health authorities, on a reciprocal basis, for the nearest available ambulance to answer an emergency call and for assistance to be given in the event of a major accident. It also has arrangements with the London County Council and the Canterbury City Council for the transportation of patients suffering from typhus or smallpox, and in one small country district the County Council provides a general ambulance service for the East Sussex County Council.

### OPERATIONAL CONTROL

#### (a) *Stretcher Patients*

Requests for transport for stretcher patients, other than emergencies, are only accepted from medical practitioners, hospitals, midwives and nurses. Medical certificates are not required but the reason for the journey must be given to show that it is one for which the provision of special transport is justified.

#### (b) *Sitting Patients*

Except in an emergency, transport for sitting patients is normally only provided on receipt of a special form which includes information as to the nature of case, reason for the journey, and a certificate which must be signed by a medical practitioner. In the case of continuing journeys, a new form is required each calendar month. All requests for transport are dealt with at the ambulance stations and further enquiries are made where appropriate.

### EMERGENCY CALLS

The control rooms at the ambulance stations at Barnehurst (which also covers the Northfleet station), Broadstairs (which also covers the Canterbury, Deal, Dover, Folkestone, Lydd and Whitstable stations), Bromley, Chatham (which also covers the Sheerness and Sittingbourne stations), Maidstone, and Tunbridge Wells (which also covers the Cranbrook and Sevenoaks stations) are manned on a 24-hour basis. In the areas served by these ambulance stations, which cover the whole County except the Ashford and Faversham areas, all emergency calls are sent by the Post Office direct to the ambulance service. In the Ashford and Faversham areas, such calls are routed by the Post Office to the nearest manned fire station, which then passes the call to the nearest manned ambulance station. It is anticipated that the re-organisation of the ambulance service's radio-telephony system will enable arrangements to be made for all emergency calls throughout the County to be sent direct by the Post Office to the ambulance service. Special stocks of blankets, stretchers and first aid equipment are kept at certain ambulance stations for use in major accidents.

The total number of accident and emergency patients attended during 1959 was 18,019, which represents 2.8 per cent of all patients conveyed by the service, and the average time taken to reach the scenes of accidents and emergencies from the receipt of the call was 6.6 minutes.

### CO-ORDINATION OF JOURNEYS

Journeys are co-ordinated whenever possible so that a number of patients can be conveyed together in the same vehicle. All journeys of twenty miles or over are reported to the County Health Department for co-ordination and shorter journeys are co-ordinated at the ambulance stations and, where appropriate, in conjunction with neighbouring stations.

### RAIL JOURNEYS

Rail transport is used for long distance journeys where practicable, and specially designed stretchers which can be used in railway carriages and also on the standard stretcher fittings in ambulances, are available at ambulance stations to facilitate the transport of patients by rail. During 1959, 3,879 patients were conveyed by rail as compared with 4,305 in 1958.

The increasing use of passenger trains consisting of non-compartment, centre gangway, multiple-unit train sets and coaches with compartments which do not provide direct access to the platform, creates difficulties concerning the transport by rail of stretcher and other patients for whom a reserved compartment is essential. The attention of British Railways has been drawn to this problem, but it is right to place on record the excellent arrangements made by the staff of British Railways for the welfare and comfort of patients transported by train.

### RADIO-TELEPHONY

The ambulance service has a radio-telephony system which covers the whole County and which comprises six main transmitting stations and one-hundred-and-seventy two-way mobile sets in vehicles. The majority of vehicles operating locally are radio-controlled and the equipment permits of inter-vehicle communication which is of considerable value. The re-organisation of the system to conform to a new system of "narrow channel" frequencies which is to be introduced by the General Post Office,



and to provide radio links between main stations to give greater operational efficiency, was commenced during 1958. This re-organisation is being carried out progressively in the three areas of the County, East Kent, Mid-Kent and West Kent, in conjunction with the replacement of worn-out equipment, and is due to be completed in 1960.

#### MAINTENANCE AND REPAIR ORGANISATION

The maintenance and repair of ambulance service vehicles is done, under the supervision of the ambulance service engineers, by ambulance service mechanics, by the Roads Department's Central Repair Depot where practicable, and by commercial garages. Workshop facilities are provided at present at three ambulance stations and similar provision will also be made in new station buildings. Ambulance stations where workshop facilities are not available are visited by mechanics, who are provided with specially fitted service vans, to carry out routine inspections, maintenance and minor repairs.

#### STATION ACCOMMODATION

Many of the ambulance station premises are unsatisfactory, being inadequate both as to office and staff accommodation generally and also as regards garage accommodation. Consequently, heavy expenditure is incurred in hiring private garage accommodation and in taking vehicles to and from these garages. In addition, the costs resulting from the deterioration of vehicles which have to be left out in the open have to be met. The Council has accordingly approved a policy of improvement. New stations have been provided at Chatham, in 1955, to replace the then existing station at Rochester serving the Medway Towns, and during 1959 at Barnehurst, which replaces the former stations at Bexley, Dartford and Erith. During 1959, also, the construction of a third new station at Maidstone was commenced to replace the existing station there. The Council has, in addition, approved in principle the provision of twelve further new replacement stations and the improvement of another during the next six years. The extension of one other station has been deferred to a later date.

#### VEHICLES

The following statement shows the vehicle position at the end of 1959:—

	<i>Ambulances for recumbent patients</i>	<i>Ambulances for sitting patients</i>
Vehicles operated by the County Council .. ..	135	97
County vehicles allocated to Canterbury Joint Service	4	1
County vehicles operated by Voluntary Associations ..	13	8
Vehicles owned and operated by Voluntary Associations	1	—
	<hr/> 153	<hr/> 106

#### OPERATIONAL STATISTICS

<i>Ambulance Service Vehicles</i>	1959	1958
Total mileage .. ..	3,643,892	3,623,649
Number of journeys .. ..	129,172	131,692
„ „ patients carried ..	632,197	615,356
„ „ emergency cases ..	18,019	17,455
<i>Hospital Car Service</i>		
Total mileage .. ..	125,039	120,034
Number of journeys .. ..	2,379	2,281
„ „ patients carried ..	6,598	6,857
<i>Whole Service</i>		
Total mileage .. ..	3,768,931	3,743,683
Number of journeys .. ..	131,551	133,973
„ „ patients carried ..	638,795	622,213

The following table shows the decrease effected in the number of miles per patient as a cumulative result of the measures introduced to promote economy in the ambulance service:—

<i>Period</i>	<i>Patients</i>	<i>Mileage</i>	<i>Miles per Patient</i>
Year ended 31.12.51 ..	436,233	3,894,912	8.93
„ „ 31.12.52 ..	520,675	3,899,458	7.49
„ „ 31.12.53 ..	572,108	3,972,118	6.94
„ „ 31.12.54 ..	614,505	4,022,462	6.54
„ „ 31.12.55 ..	609,224	3,886,692	6.38
„ „ 31.12.56 ..	608,838	3,700,494	6.08
„ „ 31.12.57 ..	599,688	3,647,768	6.08
„ „ 31.12.58 ..	622,213	3,743,683	6.01
„ „ 31.12.59 ..	638,795	3,768,931	5.90



## MENTAL HEALTH

The Mental Health Service continues to be organised as hitherto. There has been a slight alteration in the medical staff in that the Senior Assistant County Medical Officer now receives part-time assistance from three whole-time Medical Officers, the qualified medical practitioner, previously employed on a sessional basis, having retired. Certain whole-time officers of the Regional Hospital Board are available for consultation.

In connection with ascertainment, certification and discharge, the medical staff carried out 318 examinations.

The practice of admitting sub-normal and severely sub-normal persons to hospitals without the formalities of certification has continued and of the total of 133 admitted, 120 were admitted on an informal basis.

In order to ensure that no person is admitted informally to a hospital without up-to-date medical evidence, the medical staff have continued the review of cases under supervision whenever possible.

The supervision of persons living in the community continues to be carried out as appropriate by District Officers, Assistant Mental Health Officers and Health Visitors. The Guardianship Society, Hove, on behalf of the County Council, supervises 12 of the 31 cases under guardianship.

The provision of training facilities continues as a major part of the mental health service. In November, a new junior training centre was opened in Sidcup and at the end of the year, 24 children were receiving training there. The number of Centres in the County is now 11 and 501 persons are in attendance. In addition, 16 Kent cases attend the Canterbury City Training Centre, making a total of 517, which is an increase of 38 over the number attending last year.

The staff at the Centres now comprises 11 Supervisors, 33 Assistant Supervisors and 3 Male Assistant Supervisors, the latter are employed at Crayford, Hildenborough and Orpington Centres. In addition, at Hildenborough Training Centre a teacher has been employed during the year on a sessional basis to instruct those able to benefit in reading and number.

One hundred and forty-nine persons were, at the end of the year, receiving instruction from the 8 Home Teachers employed.

Increased facilities have been given to the teaching staff to obtain the appropriate qualification. Three Supervisors and 5 Assistant Supervisors are attending a 2-year "In-Service" Course arranged by the National Association for Mental Health and, in addition, 3 Assistant Supervisors have been granted unpaid leave to take the 1-Year Diploma Course run by the same body.

The annual 3-day instructional course for all teaching staff was held at Hildenborough Training Centre and again proved of great value.

In spite of the emphasis on community care, the waiting list for admission to hospital showed an increase of 60 over last year's figure, although the number actually admitted was only 22 less than the number admitted last year.

The demand for short-term care continues to increase and the Regional Hospital Board provided temporary accommodation for 136 persons, 14 more than last year.

## LUNACY AND MENTAL TREATMENT

The duties of duly authorised officers under the Lunacy and Mental Treatment Acts are carried out by 21 District Officers of the Health Department and 22 Assistant District Officers are authorised to act similarly in emergency or by way of relief. The number of patients dealt with by these officers during the year was 1,322.

After-care of patients discharged from H.M. Forces on psychiatric grounds has been undertaken by the duly authorised officers. After-care of patients discharged from mental hospitals has been undertaken normally by officers of the Hospital Management Committees but the Council's officers have assisted with such visitation when requested.

Consideration has been given to the Ministry of Health Circular 9/59 in which the Minister called the attention of local health authorities to ways in which effect might be given to recommendations of the Royal Commission on the Law relating to Mental Illness and Mental Deficiency, even before the passing of the Mental Health Bill and the Council decided on the broad outline of expansion of services to meet such recommendations.

The Mental Health Act, 1959, received the Royal Assent on the 29th July, 1959, and is to be brought into operation on dates to be determined by the Minister of Health. The implementation of the Act during the year under review was confined to the following aspects:—

- (i) An order was made by the Minister whereby patients may be admitted to mental hospitals, registered hospitals, licensed houses and other hospitals, without using the procedures laid down in the Lunacy and Mental Treatment Acts;
- (ii) The Minister made a direction requiring local health authorities to make arrangements under Section 28 of the National Health Service Act, 1946, for the prevention of mental disorder and for the care and after-care of persons suffering from mental disorder. The Minister then made a further direction requiring local health authorities to submit to him by the 1st April, 1960, their proposals for making such arrangements. The County Council gave consideration during the year under review to the proposals to be submitted and reference to the outcome will be included in my next annual report when a full report on the new Act will be made.

## ENVIRONMENTAL HEALTH

## (1) WATER SUPPLIES

(a) *The Rural Water Supplies and Sewerage Act, 1944*

Two proposals were submitted to the County Council in 1959, concerning minor water mains extensions. The total number of schemes prepared by District Councils and submitted for consideration under the Act is now 127, involving an estimated capital expenditure of approximately £150,000.

(b) *The Water Act, 1945—Section 14*

Licences are issued by the Ministry for control of the sinking of new bores and wells and the abstraction of underground water, the purpose being the conservation of underground water supplies. The Section does not apply to a bore or well used for the domestic supply of water.

The conditions incorporated in licences concern the diameter and depths of bore holes and the permitted rates of abstraction. It is also required that the necessary instrumentation be installed to record rates of flow and also that records of abstraction be kept. The number of licences issued in Kent by the Ministry is approximately 100.

A simple flow meter which records quantitatively is the usual instrument installed at wells and bores where comparatively small quantities are abstracted and this apparatus satisfies licensing requirements provided a record of readings is maintained. Small factories, laundries, and farms and market gardens using irrigation, are included in this category. The larger factory users, including food canning plant, paper mills, cement works, oil refineries, etc., normally instal instrumentation which record graphically rates of flow and having integrated counters. With these large concerns, inspection, particularly the initial inspection, can be a long and involved procedure.

Where large quantities of water are abstracted from a number of bores it is of vital concern to the consumer himself that yield and abstraction be closely watched and the records kept for this purpose also satisfy licence requirements.

Statutory water undertakers have a direct interest in the functioning of Section 14 of the Act and a practice is made of giving to the statutory water undertaker(s) immediately concerned, prior notification of pending visits to licensed wells and bores.

(c) *Examination of Water Supplies*

During the year local authorities in the County submitted samples of distributed water supplies for bacteriological and chemical examination to the extent indicated in the following table:—

	<i>Bacteriological</i>	<i>Chemical</i>
(a) from statutory water supply undertakings*	1,936	228
(b) from private sources piped to dwellings ..	219	21
(c) from other private sources .. .. .	194	23

\*Excluding Metropolitan Water Board area of supply

In addition to these examinations the Mid-Kent Water Company regularly submits reports on sources of water (i.e. of raw untreated water).

*Number of dwellings not supplied by pipes*

Returns by district councils indicate that the number of dwellings in the administrative County area not supplied by public water mains or other adequate pipe supplies is estimated to be 1,653.

(d) *Protection of underground water*

Some minor cases involving advisory work were dealt with during the year.

## (2) SEWERAGE

Since 1945 the County Council has given consideration, for grant purposes, to 160 sewerage schemes prepared and submitted by local authorities with estimated costs amounting to approximately £2,000,000.

Consulting engineers are engaged by most of the District Councils to prepare drainage schemes, which are then investigated by the Engineering Department of the Ministry of Housing and Local Government.

Under the Rural Water Supplies and Sewerage Act, 1944, it is obligatory that particulars of proposed schemes are submitted to the County Council.

Two schemes which have recently been approved for grant purposes by the County Council and which are of special interest are as follows:—



*Dymchurch and St. Mary's Bay Sewerage Scheme*

This scheme is designed to provide amenities in a situation where special difficulties arise concerning sub-soil, land drainage and foreshore protection. Because of these difficulties the cost will be high and ordinarily beyond the financial resources of the Romney Marsh Rural District Council. In these circumstances, financial assistance from the Government and the County Council is to be equal to the whole capital cost of the scheme. Special arrangements have been made to ensure the closest possible co-operation between the District Council and the County Council during the long interval required for construction purposes.

*Northfleet Sewerage Scheme*

Arising from proposals involving consideration of underground water sources and other factors, the Northfleet Urban District Council decided to provide an alternative to the present means of disposal of the sewage works effluent, viz., the Ebbsfleet stream.

In the result, a 5 ft. diameter tube was constructed between the sewage disposal works and the River Thames, for a distance of approximately one mile.

A substantial grant towards the cost of the work, estimated to be in the region of £140,000, has been approved by the County Council.

(3) MILK AND DAIRIES

(a) The department has continued its activities in this field throughout the year. The specific functions performed under this heading continued to be the supervision of installations for the pasteurisation and sterilisation of milk, the biological condition of raw milk supplies from farms and the general approval of source and quality of school milk supplies. Short reports on these items are given. Under an existing arrangement with the Ministry of Health, milk sampling for keeping quality and biological condition was carried out at six hospital dairy farms in the County as in previous years, and results of these samples are given separately below. The County Medical Officer is represented on the Milk Production Committee of the County Agricultural Executive and the monthly meetings have been attended regularly. Consultations with officers of Local Authorities are arranged as necessary for discussion of technical matters of joint interest. The County is a "Specified Area", that is, one in which only milk of certain grades can be sold by retail—these grades being pasteurised, sterilised and tuberculin tested.

(b) *Pasteurisation Plants*

The number of dairies in the County licensed to pasteurise milk is as follows:—

Licensed by the County Council .. .. .	21
Licensed by other Food and Drugs Authorities in Kent .. .. .	20

Twenty dairies were licensed by the County Council at the beginning of the year. During the year one more licence was issued and one dairy ceased to function as a pasteurising unit.

These twenty installations are made up of eight batch holder processing plants and twelve "high-temperature-short-time" plants. The "H.T.S.T." plants are continuous flow types and this design of plant is used for larger quantities. The batch type pasteuriser is the more economical for small quantities and in this case the milk is heated in separate holders of 50 to 150 gallon capacity. The necessary instrumentation is installed in both types, but whereas automatic "safety" control is incorporated in the "H.T.S.T." plant to deal with inadequate heating, the holder plant depends entirely upon the supervision of the operator.

Samples of pasteurised milk are submitted to two prescribed tests, the Methylene Blue test, which is, briefly, a measure of the keeping quality of the milk, and the Phosphatase test. The latter is a measure of the adequacy of the pasteurising process to which the milk has been subjected and it is satisfactory to report that of all the samples taken during the year from pasteurising plants licensed by the County Council, none failed this test.

So far as inspection is concerned, the most important issues which arise continue to be in relation to temperature levels, the operation of controlling devices and procedure in relation to bottle washing and the filling and capping of bottles.

The results achieved so far as processing is concerned are exemplified by the results of examination of samples. Details of those examined on behalf of the County Council and the further examinations in the wider field of distribution by Local Authorities are as follows:—

	No. of Samples	Appropriate Tests	Number of Samples	
			Passed	Failed
County Council Plant Sampling .. .. .	190	Phosphatase Methylene Blue	190	Nil
			180 (10 void)	Nil
County Council School Milk Sampling .. .. .	151	Phosphatase Methylene Blue	151	Nil
			131 (10 void)	10
Local Authority Sampling (including other Food and Drugs Authorities) .. .. .	2,118	Phosphatase Methylene Blue	2,108	10
			1,992 (8 void)	40



As indicated, generally satisfactory conditions exist. Surfaces which come into direct contact with milk must be in a condition approaching sterility and, in particular, circumstances of bottle filling must be beyond reproach. Dairy supervision must include the continued investigation of all these items.

In March, 1959, the Milk and Dairies (General) Regulations, 1959, replaced the Milk and Dairies Regulations, 1949. Basically, the new Regulations are the same as the old, but there are certain important changes. One of these concerns the payment of compensation under the infected milk clauses, a matter which has caused much concern in previous years. Compensation is now payable to a dairy farmer who has suffered loss as a result of being served with an infected milk notice, only if that notice has been wrongly served or not withdrawn as quickly as possible. Previously the position was that a person could, in certain circumstances, claim compensation from the Local Authority whose Medical Officer of Health had served the notice, if that person could show that he had not been aware of the existence of the infection. Other important changes deal with protective clothing, waterproof dressings for cuts, abrasions, etc., prohibiting the use of tobacco, payment of compensation by Local Authorities to persons debarred from dairy work because of disease, and amendment relating to registration of distributors. The Regulations are primarily the concern of District Councils, but also concern County Councils in the administration of The Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949/1953.

#### *(c) Sterilisation Plant*

Towards the end of the year one large dairy commenced the installation of plant for the sterilisation of milk. Application for the necessary licence was not received until after the end of 1959, but at the time of writing this plant has been licensed and is in operation.

#### *(d) Biological Examination of Milk*

The programme of farm sampling at morning milking was continued throughout the year and 597 farms were visited.

The County is an "attested area", that is, one in which the eradication of tuberculosis programme requires that all dairy cows pass a tuberculin test. The examination for tuberculosis of all farm milk samples is complementary to this programme of eradication and, as is to be expected, no evidence of the disease was found.

*Brucella abortus*, an organism which causes illness in man and which is responsible for contagious abortion in cattle, was not absent however, and evidence of this disease was found in the milk of ten of the farms sampled during the year.

There is no doubt that the advent of Strain 19 inoculation of cows and its increasing use by dairy farmers has greatly reduced clinical abortion. Nevertheless, out of a total of 1,161 farms sampled to date in the present sampling programme, 32 (some 2.75%) have been found to show evidence of infection and it is of interest to note that the cows at 23 of these farms are known to have had Strain 19 inoculation. Modern research has shown that Strain 19, although successful in controlling clinical abortion, does not necessarily prevent udder infection of the milk in an infected cow and it follows, therefore, that in the absence of the visual effects of the disease, an infected milk supply could continue unnoticed. In these circumstances, the only practical method of discovery is biological examination of the milk.

#### *(e) Hospital Dairy Farms*

Duties at hospital farms comprise monthly sampling of milk supplies for keeping quality examination and three-monthly sampling for biological examination. Six samples failed the Methylene Blue test during the year; all the biological examinations were satisfactory. The Director of the Public Health Laboratory notifies the Ministry of all results and usually no further action is called for by the department.

#### *(f) Milk in Schools Scheme*

The County Medical Officer, in consultation with the District Medical Officers of Health, is required to approve the source and quality of school milk supplies. In general, approved supplies are of pasteurised milk, but there still remain some six schools (each having a different supplier) for which it is not possible to obtain a pasteurised supply. In these six cases tuberculin tested milk is delivered. As an added safeguard, each of these supplies is submitted for biological examination three times a year.

The examination of school milk supplies in the County Food and Drugs area is provided for by a sampling programme arranged by the Chief Inspector of Weights and Measures, and in the remainder of the County by the other Food and Drugs Authorities. In addition to the biological examinations already described, samples are submitted to the prescribed tests for pasteurised milk and to examination for chemical composition. A summary of these sample results is given overleaf.

Adverse reports on samples, together with complaints concerning supplies generally, are for the most part dealt with by the District Councils concerned without immediate reference to this department.

The number of contractors supplying milk to schools throughout the County is 99.

Authority	Number of samples subjected to:—					
	Pasteurised Milk				Raw Milk	
	Phosphatase Test		Methylene Blue Test		Biological Examination	
	Pass	Fail	Pass	Fail	Neg.	Pos.
Kent County Council ..	151	—	131 (10 Void)	10	22	Nil
Other Food and Drugs Authorities .. ..	208	1	199 (5 Void)	5	—	—

Of the above samples 76 were submitted for examination for chemical composition. All were found to be satisfactory in respect of milk fat and solids not fat.

(g) *Milk and Dairies Regulations, 1949; Milk and Dairies (General) Regulations, 1959.*

The number of dairies and distributors registered by district councils during the year under the above regulations are:—

Number of registered dairies in the County Food & Drugs area .. ..	114
Number of registered dairies in the other Food & Drugs areas .. ..	101
Number of registered distributors in the County area .. ..	1,890

(h) *Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949; Milk (Special Designation) (Raw Milk) Regulations, 1949.*

The number of licences and supplementary licences issued by district councils under the above regulations (excluding licences to pasteurise or sterilise milk) is 3,456.

#### (4) MEAT INSPECTION AND SLAUGHTERHOUSES

##### (a) *Meat Inspection*

##### CARCASES AND OFFAL INSPECTED AND CONDEMNED IN WHOLE OR IN PART

	Cattle-excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed (if known) .. ..	10,344	3,060	5,216	88,480	130,694	—
Number inspected .. ..	10,344	3,060	5,216	88,480	130,694	—
<i>All diseases except Tuberculosis and Cysticerci</i>						
Whole carcases condemned .. ..	10	13	21	342	166	—
Carcases of which some part or organ was condemned .. ..	2,007	1,162	40	5,139	9,025	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci .. ..	19.5	38.4	1.2	6.2	7	—
<i>Tuberculosis only:—</i>						
Whole carcases condemned .. ..	—	2	—	—	15	—
Carcases of which some part or organ was condemned .. ..	74	62	—	—	1,518	—
Percentage of the number inspected affected with tuberculosis .. ..	71	2	—	—	1.17	—
<i>Cysticercosis</i>						
Carcases of which some part or organ was condemned .. ..	39	12	—	—	—	—
Carcases submitted to treatment by refrigeration .. ..	38	11	—	—	—	—
Generalised and totally condemned ..	—	—	—	1	—	—

(b) *No. of Slaughterhouses in Use:—*

Slaughterhouses/ Abattoirs in Operation Owned or Leased by Local Authority	Private Slaughterhouses		Bacon Factories	Knackers' Yards
	Licensed	Operating		
8	82	76	2	9

Once again these figures show that 100% inspection is carried out on all animal carcasses slaughtered for human consumption in the County area.

(c) *Food-Preparing Premises*

Given below is a summary of the information supplied by district councils in connection with food preparing premises:—

(a) the number of food premises in the area .. .. .	15,748
(b) the number of food premises registered under Section 16 of the Food and Drugs Act, 1955 .. .. .	6,889
(c) the number of inspections of registered food premises.. ..	20,376

(5) **HOUSING**

The following information has been collated from figures supplied by district councils. It is a summary of quarterly returns made by local authorities to the Ministry of Housing and Local Government during the year ended 31st December, 1959:—

*Houses in clearance areas and unfit houses elsewhere*(a) *Houses demolished*

	<i>Houses Demolished</i>	<i>Displaced during year Persons</i>	<i>Families</i>
<i>In Clearance Areas (Housing Act 1957)</i>			
(1) Houses unfit for human habitation ..	722	1,553	581
(2) Houses included by reason of bad arrange- ment .. .. .	—	—	—
(3) Houses on land acquired under Section 43(2) Housing Act, 1957 .. .. .	17	63	24
<i>Not in Clearance Areas</i>			
(4) As a result of formal or informal procedure under Section 17(1) Housing Act, 1957 ..	472	669	212

(b) *Unfit Houses Closed*

	<i>Number</i>
(5) Under Section 16(4), 17(1) and 35(1) Housing Act, 1957 ..	359
(6) Under Sections 17(3) and 26 Housing Act, 1957 .. ..	10
(7) Parts of buildings closed under Section 18, Housing Act, 1957..	43

(c) *Unfit Houses made fit and houses in which defects were remedied*

	<i>By Owner</i>	<i>By Local Authority</i>
(8) After informal action by local authority.. .. .	770	—
(9) After formal notice under—		
(a) Public Health Acts .. .. .	516	—
(b) Sections 9 and 16 Housing Act, 1957 .. ..	67	34
(10) Under Section 24 Housing Act, 1957 .. .. .	34	—

(d) *Unfit houses in temporary use (Housing Act, 1957)*

<i>Position at end of year</i>	<i>No. of houses (1)</i>	<i>No. of separate dwellings contained in column (1) (2)</i>
(11) Retained for temporary accommodation		
(a) Under Section 48 .. .. .	—	—
(b) Under Section 17(2) .. .. .	11	11
(c) Under Section 46 .. .. .	—	—
(12) Licensed for temporary occupation under Section 34 or 53.. .. .	—	—



## (e) Purchase of houses by agreement

	<i>No. of occupants No. of of houses houses in column (1)</i>	
	(1)	(2)
(13) Houses in Clearance Areas, other than those included in confirmed Clearance Orders or Compulsory Purchase Orders, purchased in the year .. .. .	52	112

## RESIDENTIAL SERVICES

## RESIDENTIAL ACCOMMODATION FOR ELDERLY AND DISABLED PERSONS

Homes provided directly by the County Council and residential accommodation at hospitals are:—

<i>County Homes</i>				<i>At Hospitals Administered by Hospital Management Committees unless otherwise indicated</i>			
AREA 1 (Pop. approx. 197,380)	Old Rectory, Smarden .. .. .	30					
	Woodside, Dover .. .. .	20		St. Mary's, Etchinghill .. .. .	77		
	Leahurst, Dover .. .. .	20		West View, Tenterden .. .. .	48		
	Cairn Ryan, Dover .. .. .	25					
	General's Meadow, Walmer .. .. .	38					
	Portal House, Nr. Dover .. .. .	65					
		198					125
AREA 2 (Pop. approx. 189,320)	Eastry House, Eastry .. .. .	28		The Close, Bridge (K.C.C.) .. .. .	*51		
	Brendon, Margate .. .. .	25		Hill House, Minster .. .. .	76		
	Radley, Tankerton .. .. .	31		Eastry Hospital .. .. .	60		
		84					187
AREA 3 (Pop. approx. 145,090)	East Hall, Maidstone .. .. .	39		Linton Hospital .. .. .	79		
	Hartley House, Cranbrook .. .. .	113					
		152					79
AREA 4 (Pop. approx. 147,370)	Pembury Grange, Tunbridge Wells .. .. .	38					
	Sandhurst, Tunbridge Wells .. .. .	30					
	Court Royal, Tunbridge Wells .. .. .	31					
	Oakhurst, Hildenborough .. .. .	24					
	Hardwick, Hildenborough .. .. .	60					
	Kippington House, Sevenoaks .. .. .	41					
		224					
AREA 5 (Pop. approx. 335,960)	Blackburn, Sheerness .. .. .	37		Bensted House, Faversham (K.C.C.) .. .. .	*113		
	Medway Homes, Rochester .. .. .	162		Milton Regis .. .. .	77		
				All Saints', Chatham .. .. .	17		
				St. James', Gravesend .. .. .	80		
		199					287
AREA 6 (Pop. approx. 290,490)	St. Mary's, Bexley .. .. .	40		West Hill, Dartford .. .. .	69		
	The Mount, Nr. Dartford .. .. .	32					
	Manor Gate, Nr. Dartford .. .. .	31					
	Darenth Grange, Nr. Dartford .. .. .	52					
	Old Downs, Hartley .. .. .	39					
	Holywell, Nr. Meopham .. .. .	46					
	Russell House, Bexleyheath .. .. .	50					
		290					69
AREA 7 (Pop. approx. 330,390)	Lubbock House, Orpington .. .. .	42		Orpington .. .. .	56		
	Elmbank, Bromley .. .. .	37					
	Durham House, Beckenham .. .. .	60					
	Selwood, Chislehurst .. .. .	36					
		175					56
	Total for Homes .. .. .	1,322		Total for Hospitals .. .. .	803		
	TOTAL .. .. .	2,125					

\*Excludes hospital beds.

Additional accommodation of 91 beds was brought into use during 1959, including 65 at the new Home, Portal House, St. Margaret's-at-Cliffe; 20 at the enlarged East Hall, Maidstone, and 6 by re-arrangement of accommodation at Hartley House, Cranbrook. A total of 4 beds was lost at Holywell, near Meopham, to provide space for the new heavy-duty passenger lift, and at Selwood arising from the scheme to provide a sick bay and better accommodation for the Assistant Matron. Although this increase is much better than the 1958 one of only 23 additional places, it was not so good as 1957 which, with 132 new places, was the best year since 1953.

The increasing degree to which the residents now accommodated require care and attention renders the existing Homes less suitable than they were when provided in the early years after 1948. Much has been done to eliminate unsatisfactory features and improvements authorised for 1959 included the installation of heavy-duty passenger lifts at Darenth Grange and Holywell; provision of a light-duty passenger lift, better sanitary facilities and other minor improvements at Elmbank, Bromley; provision of proper facilities to deal with the preparation and service of medicines to the residents at Russell House, Bexleyheath; the provision of a sick bay at Selwood, Chislehurst; and of better staff accommodation at The Old Rectory, Smarden. There were also works, at a cost of some £6,500, to modernise the kitchen and meals service arrangements, improve the bathroom and toilet facilities together with a number of other improvements to make the accommodation more suitable for persons who have difficulty in climbing stairs at Manor Gate, Wilmington. At The Mount, Wilmington, new sanitary facilities have been provided on both floors. Some temporary arrangements were made several years ago in a former air raid shelter and it was, perhaps, fortunate that this was found to be on the only acceptable site for the new boiler house which will serve both The Mount and the new Bungalow Home adjacent, which the Committee decided to name "Stanley Morgan House" in memory of someone who as a Member of the Dartford Board of Guardians, the Public Assistance Committee and Health Committee, respectively, did so much in his many years of public service for the welfare of elderly and handicapped persons.

#### ACCOMMODATION AND CARE OF OLD PEOPLE

In continuation of the policy commented upon in the last report, further grants to County District Councils for welfare services provided at old people's housing accommodation were approved during 1959 to:—

<i>District Council</i>	<i>Particulars</i>	<i>Grant not exceeding £</i>
Beckenham Borough	23 flatlets in four converted houses at Newlands Park, Beckenham (on behalf of Hearth and Homes, Ltd., a Housing Association) .. ..	510
Chatham Borough	To introduce a Warden to serve two large housing estates, Wayfields and Weeds Wood, where there are approximately 250 old people's dwellings .. ..	593
Chatham Borough	24 flatlets in new construction at Palmerston Road, Chatham ..	720
Chislehurst & Sidcup Urban District	Further 9 flatlets in converted house in Station Road, Sidcup, adjacent to the one approved in 1958. (Administration to be under-taken by the North-West Kent Housing Society, Ltd.)..	270
Orpington Urban District	For a Warden at an existing group of 59 flats in Brittenden Close, Orpington	484
Orpington Urban District	60 dwellings in new construction on Ramsden Estate .. ..	673
Swale Rural District	16 flatlets in new construction plus 2 adjacent bungalows at Newington ..	540
Tonbridge Rural District	28 single storey bed-sitting room units in new construction at Pembury ..	924

The object of the scheme is to provide facilities to permit old people to continue to lead an independent life for longer than might otherwise be possible. The County Council's grants are for such items as remuneration and housing of a resident warden, telephone, cost of communal facilities including a general sitting room in which residents can gather for social events and warning systems from tenants to the warden.

## VOLUNTARY ORGANISATIONS

Apart from the continuation of the usual pattern of co-operation with financial assistance to various organisations concerned with the welfare of elderly persons, two special matters have received consideration during the year. Firstly, in consultation with the W.V.S. the existing schemes for home meals, developed with financial assistance from the Council over the past ten years, have been reviewed in relation to need. This showed that there were some heavily populated areas where special circumstances had, so far, prevented the introduction of local schemes and that to remedy the position would be likely to be more costly because delivery vans would be required in the absence of an adequate number of voluntary drivers. The Committee made additional provision in its Estimates for 1960/61 for this purpose.

The second special matter was that of a scheme to introduce elderly persons not requiring residential care in an Old People's Home to suitable householders who would accept them on a board-lodging basis. This question has been the subject of experimental schemes in various parts of the country over the past ten years and in 1956 the North-West Council of Social Service decided to undertake a similar experiment. Since the Health Committee's enquiries showed that this service was worthy of support, a grant of £100 was made for 1959 towards the administrative costs, with the promise of a further grant for 1960.

In connection with these enquiries, there had been a survey of persons in the Committee's own Old People's Homes numbering 1,943. Although this survey confirmed that none of the persons admitted to Homes for residential care was specifically suitable to leave, if they could be found suitable lodgings, it did confirm that the existence of such lodgings, provided the scheme could operate in circumstances of emergency, could give a slight relief to the demand on the accommodation in the Homes. This could be for a few persons, apparently up to about 20 a year, who had been admitted to Homes primarily because of urgent accommodation needs, although their need for care and attention was much less than most of the 900 persons on the waiting list. Experience shows that, once they have become habituated to the communal life in a Home and been relieved of the necessity to do everything for themselves, the majority of such persons lose the desire and the ability to do so.

The number of persons in Homes managed by voluntary organisations to which the Committee makes maintenance payments was, at the end of 1959:—

Old People's Homes	..	..	..	418
Special Homes:—				
Blind	..	..	..	80
Deaf and/or Dumb	..	..	..	10
Crippled	..	..	..	18
Epileptics	..	..	..	54
Spastic	..	..	..	6
Others	..	..	..	17
			—	185
				<hr/> 603 <hr/>

One noteworthy and pleasing instance of co-operation from voluntary organisations was the action of the League of Friends of Canterbury Hospitals who agreed to contribute half the cost of providing amenities for the patients and residents at The Close, Bridge, in the form of gardens and lawns in substitution for the institutional courtyards, estimated to cost just over £3,000.

## TEMPORARY ACCOMMODATION

No reasons can be determined to explain why the demand for temporary accommodation in 1959 was less than in 1958. During the year what is termed the "seven day rule" was introduced. Families were having to be admitted for the full three months although they had often come to Kent only a few days previously in circumstances that, in general, would clearly result in their being rapidly homeless. The Committee decided that families, which had no connection with Kent and had come into the County in circumstances which showed that they could reasonably have foreseen that permanent accommodation would not be likely to be available to them, should be admitted to temporary accommodation for one week, thereafter the period to be extended to a total of not exceeding one month in exceptional circumstances. During 1959 20 families were admitted under these arrangements and their stay lasted for:—

Not exceeding one week	..	..	..	13
Not exceeding two weeks	..	..	....	7

The works approved by the Council should permit, during 1960, the whole of the hostel accommodation to be in the accommodation originally built in 1940 for general hospital purposes, thus making it possible for the old and unsuitable former institution buildings to be taken out of use.



## STATISTICAL TABLES

TABLE 1

Showing Population, Acreage and Density of Population of the various Districts of the County of Kent, in 1959 (mid-year)

DISTRICT	Mid-year Home* Population 1959 (as estimated by the Registrar-General)	Acreage inclusive of Water	Persons per Acre
Urban—			
Ashford U. . . . .	26,550	5,657	4.69
Beckenham B. . . . .	75,220	5,937	12.67
Bexley B. . . . .	90,500	4,869	18.59
Broadstairs and St. Peter's U. . . . .	16,950	2,771	6.12
Bromley B. . . . .	65,860	6,519	10.10
Chatham B. . . . .	51,820	4,356	11.90
Chislehurst and Sidcup U. . . . .	89,020	8,957	9.94
Crayford U. . . . .	30,600	2,699	11.34
Dartford B. . . . .	43,940	4,233	10.38
Deal B. . . . .	25,750	2,903	8.87
Dover B. . . . .	34,680	3,979	8.72
Erith B. . . . .	45,700	4,607	9.92
Faversham B. . . . .	12,420	2,994	4.15
Folkestone B. . . . .	44,370	4,006	11.08
Gillingham B. . . . .	77,590	8,351	9.29
Gravesend B. . . . .	48,370	4,016	12.04
Herne Bay U. . . . .	19,700	8,566	2.30
Hythe B. . . . .	10,080	3,013	3.35
Lydd B. . . . .	3,140	11,932	0.26
Maidstone B. . . . .	56,680	6,194	9.15
Margate B. . . . .	43,660	6,960	6.27
New Romney B. . . . .	2,440	1,514	1.61
Northfleet U. . . . .	20,720	3,770	5.50
Orpington U. . . . .	74,620	20,842	3.58
Penge U. . . . .	25,670	770	33.34
Queenborough B. . . . .	3,220	1,103	2.92
Ramsgate B. . . . .	36,100	3,624	9.96
Rochester B. . . . .	47,910	4,378	10.94
Sandwich B. . . . .	4,280	2,137	2.00
Sevenoaks U. . . . .	16,950	3,728	4.55
Sheerness U. . . . .	15,400	943	16.33
Sittingbourne and Milton U. . . . .	22,700	4,935	4.60
Southborough U. . . . .	9,100	1,758	5.18
Swanscombe U. . . . .	8,940	2,112	4.23
Tenterden B. . . . .	4,820	8,946	0.54
Tonbridge U. . . . .	21,050	4,599	4.58
Tunbridge Wells B. . . . .	38,810	6,034	6.43
Whitstable U. . . . .	17,670	7,640	2.31
TOTALS—Urban . . . . .	1,283,000	192,352	6.67
Rural—			
Ashford, East . . . . .	10,580	51,398	0.21
Ashford, West . . . . .	10,420	39,455	0.26
Bridge-Blean . . . . .	19,240	55,868	0.34
Cranbrook . . . . .	15,070	41,315	0.36
Dartford . . . . .	50,090	34,103	1.47
Dover . . . . .	12,660	26,098	0.49
Eastry . . . . .	22,030	56,413	0.39
Elham . . . . .	9,690	36,676	0.26
Hollingbourn . . . . .	16,850	56,976	0.30
Maidstone . . . . .	19,280	34,709	0.56
Malling . . . . .	37,210	45,655	0.82
Romney Marsh . . . . .	4,530	34,048	0.13
Sevenoaks . . . . .	37,190	62,959	0.59
Sheppey . . . . .	9,700	20,319	0.48
Strood . . . . .	26,490	48,541	0.55
Swale . . . . .	20,340	62,015	0.33
Tenterden . . . . .	7,360	38,002	0.19
Tonbridge . . . . .	24,270	41,687	0.58
TOTALS—Rural . . . . .	353,000	785,237	0.45
TOTALS—County . . . . .	1,636,000	977,589	1.67

\* The figures given in this column are the home populations, including members of the armed forces stationed in the area, and these populations form the basis of calculation of most of the rates given in this report.

TABLE 2

Showing Deaths, Births and Infantile Mortality in the different Urban and Rural Districts of the County of Kent in the year 1959.

DISTRICT	DEATHS				BIRTHS					INFANTILE MORTALITY			
	Number of deaths at all ages	Deaths per 1,000 of the population	Comparable Death-rate*	Legitimate	Illegitimate	TOTAL	Births per 1,000 of the population	Comparable Birth-rate*	Still-births	Legitimate	Illegitimate	TOTAL	Deaths of Infants under one year of age per 1,000 births
<b>URBAN—</b>													
Ashford U. ..	296	11.15	10.48	364	17	381	14.35	14.64	9	5	—	5	13.12
Beckenham B. ..	876	11.65	10.72	924	29	953	12.67	13.43	15	13	1	14	14.69
Bexley B. ..	793	8.76	10.77	1,263	37	1,300	14.36	14.65	20	17	—	17	13.08
Broadstairs U. ..	264	15.58	11.69	166	10	176	10.38	11.63	5	2	—	2	11.36
Bromley B. ..	757	11.49	10.80	870	39	909	13.80	13.80	10	14	—	14	15.40
Chatham B. ..	505	9.75	10.34	959	52	1,011	19.51	18.92	24	14	—	14	13.85
Chislehurst and Sidcup U. ..	762	8.56	11.21	1,220	51	1,271	14.28	13.85	23	24	1	25	19.67
Crayford U. ..	229	7.48	9.87	485	11	496	16.21	15.40	6	14	1	15	30.24
Dartford B. ..	603	13.72	11.66	674	26	700	15.93	15.61	9	9	2	11	15.71
Deal B. ..	291	11.30	11.19	375	21	396	15.38	16.30	11	12	1	13	32.83
Dover B. ..	360	10.38	10.28	556	28	584	16.84	16.84	12	8	1	9	15.41
Erith B. ..	469	10.26	11.81	661	28	689	15.08	15.08	19	9	—	9	13.06
Faversham B. ..	206	16.59	9.79	190	9	199	16.02	16.66	1	3	—	3	15.08
Folkestone B. ..	568	12.80	11.14	585	33	618	13.93	14.63	13	6	—	6	9.71
Gillingham B. ..	811	10.45	11.81	1,175	57	1,232	15.88	16.36	31	23	1	24	19.48
Gravesend B. ..	497	10.27	11.30	856	55	911	18.83	18.27	16	19	1	20	21.95
Herne Bay U. ..	402	20.41	13.47	179	12	191	9.70	11.06	5	—	—	—	0.00
Hythe B. ..	161	15.97	12.30	97	6	103	10.22	11.34	—	—	—	—	0.00
Lydd B. ..	22	7.01	8.48	52	2	54	17.20	21.16	—	2	—	2	37.04
Maidstone B. ..	671	11.84	10.77	878	32	910	16.06	16.70	23	19	—	19	20.88
Margate B. ..	680	15.57	12.14	461	48	509	11.66	12.71	12	7	—	7	13.75
New Romney B. ..	24	9.84	8.66	27	3	30	12.30	12.67	1	1	—	1	33.33
Northfleet U. ..	208	10.04	11.65	348	8	356	17.18	16.66	17	7	—	7	19.66
Orpington U. ..	751	10.06	11.27	1,340	48	1,388	18.60	18.23	21	18	2	20	14.41
Penge U. ..	285	11.10	10.77	537	32	569	22.17	20.17	11	11	—	11	19.33
Queenborough B. ..	36	11.18	12.52	44	2	46	14.29	14.58	1	1	—	1	21.74
Ramsgate B. ..	493	13.66	11.61	513	46	559	15.48	16.41	10	16	1	17	30.41
Rochester B. ..	530	11.06	11.94	766	40	806	16.82	16.48	19	18	2	20	24.81
Sandwich B. ..	56	13.08	10.33	65	4	69	16.12	18.54	—	2	—	2	28.99
Sevenoaks U. ..	215	12.68	10.65	246	6	252	14.87	15.17	4	3	—	3	11.90
Sheerness U. ..	182	11.82	12.53	251	16	267	17.34	18.73	7	6	—	6	22.47
Sittingbourne U. ..	282	12.42	9.56	374	21	395	17.40	17.75	7	6	1	7	17.72
Southborough U. ..	92	10.11	7.58	122	1	123	13.52	15.68	3	2	—	2	16.26
Swanscombe U. ..	82	9.17	11.28	102	3	105	11.74	10.92	1	5	—	5	47.62
Tenterden B. ..	99	20.54	10.89	58	2	60	12.45	13.07	1	2	—	2	33.33
Tonbridge U. ..	258	12.26	11.03	345	13	358	17.01	17.52	12	11	—	11	30.73
Tunbridge Wells B. ..	705	18.17	11.27	498	22	520	13.40	14.61	15	13	—	13	25.00
Whitstable U. ..	343	19.41	12.23	226	11	237	13.41	17.03	3	2	—	2	8.44
<b>TOTALS IN URBAN DISTRICTS</b>	<b>14,864</b>	<b>11.59</b>	<b>11.24</b>	<b>18,852</b>	<b>881</b>	<b>19,733</b>	<b>15.38</b>	<b>15.69</b>	<b>397</b>	<b>344</b>	<b>15</b>	<b>359</b>	<b>18.19</b>
<b>RURAL—</b>													
Ashford, East ..	130	12.29	10.20	125	5	130	12.29	13.64	4	3	1	4	30.77
Ashford, West ..	175	16.79	10.07	142	7	149	14.30	15.02	3	—	—	—	0.00
Bridge-Blean ..	323	16.79	10.24	266	12	278	14.45	18.06	2	1	1	2	7.19
Cranbrook ..	194	12.87	9.91	187	11	198	13.14	13.67	2	3	—	3	15.15
Dartford ..	483	9.64	10.31	950	29	979	19.54	19.15	13	10	1	11	11.24
Dover ..	147	11.61	10.22	184	5	189	14.93	17.32	12	7	—	7	37.04
Eastry ..	337	15.30	12.70	340	19	359	16.30	19.23	7	8	1	9	25.07
Elham ..	175	18.06	7.95	126	6	132	13.62	14.44	2	5	—	5	37.88
Hollingbourn ..	177	10.50	9.77	269	17	286	16.97	17.82	6	6	—	6	20.98
Maidstone ..	271	14.06	9.56	299	23	322	16.70	17.54	5	8	1	9	27.95
Malling ..	410	11.02	11.24	599	26	625	16.80	17.64	10	14	3	17	27.20
Romney Marsh ..	52	11.50	10.58	64	5	69	15.23	17.51	2	1	—	1	14.49
Sevenoaks ..	391	10.51	9.88	612	13	625	16.81	17.48	8	6	—	6	9.60
Sheppey ..	131	13.51	13.24	155	11	166	17.11	19.33	3	3	—	3	18.07
Strood ..	213	8.04	9.09	483	18	501	18.91	18.34	12	9	—	9	17.96
Swale ..	205	10.08	9.98	281	17	298	14.65	15.09	5	3	—	3	10.07
Tenterden ..	100	13.59	12.10	116	11	127	17.26	18.64	2	2	—	2	15.75
Tonbridge ..	314	12.94	10.74	384	24	408	16.81	16.64	5	10	—	10	24.51
<b>TOTALS IN RURAL DISTRICTS</b>	<b>4,228</b>	<b>11.98</b>	<b>10.54</b>	<b>5,582</b>	<b>259</b>	<b>5,841</b>	<b>16.55</b>	<b>17.38</b>	<b>103</b>	<b>99</b>	<b>8</b>	<b>107</b>	<b>18.32</b>
<b>TOTALS IN URBAN DISTRICTS</b>	<b>14,864</b>	<b>11.59</b>	<b>11.24</b>	<b>18,852</b>	<b>881</b>	<b>19,733</b>	<b>15.38</b>	<b>15.69</b>	<b>397</b>	<b>344</b>	<b>15</b>	<b>359</b>	<b>18.19</b>
<b>TOTALS IN COUNTY ..</b>	<b>19,092</b>	<b>11.67</b>	<b>11.09</b>	<b>24,434</b>	<b>1,140</b>	<b>25,574</b>	<b>15.63</b>	<b>16.10</b>	<b>500</b>	<b>443</b>	<b>23</b>	<b>466</b>	<b>18.22</b>

\* Comparable rates are calculated in respect of each district, by applying to the crude-rate a factor which enables true comparison to be made with other areas after allowing for variations of age and sex in the constitution of the population.



TABLE 3

Showing the Number of Cases of Infectious Disease among the Civil Population, notified in each of the DISTRICTS in the County of Kent during the year 1959.

DISTRICT	Small-pox	Diphtheria (including Membranous Croup)	Erysipelas	Scarlet Fever	Enteric Fever	Puerperal Pyrexia	Acute Polio-myelitis including Acute Polio-encephalitis		Acute Encephalitis		Meningococcal Infection	Ophthalmia Neonatorum	Respiratory Tuberculosis	Other forms of Tuberculosis	Acute Pneumonia (Primary or Influenza)	Measles	Whooping Cough	Dysentery	Malaria
							Paralytic	Non-Paralytic	Infective	Post-Infectious									
URBAN—																			
Ashford U. ..	—	—	3	33	—	6	—	—	—	—	—	—	5	—	6	57	7	1	—
Beckenham B. ..	—	—	4	70	—	7	—	—	—	—	1	4	37	5	60	935	58	33	—
Bexley B. ..	—	—	11	105	—	7	—	—	—	—	1	—	50	6	24	985	128	2	—
Broadstairs U. ..	—	—	2	13	—	—	—	—	—	—	—	—	3	—	7	515	40	4	—
Bromley B. ..	—	—	3	131	—	15	—	—	—	—	—	—	36	5	26	599	30	5	—
Chatham B. ..	—	—	3	70	4	12	—	—	—	—	—	1	44	3	28	879	107	21	—
Chislehurst and Sidcup U. ..	—	—	4	77	—	9	2	—	—	—	3	2	37	1	42	1,127	88	10	—
Crayford U. ..	—	—	2	12	—	9	—	—	—	—	—	—	8	3	1	228	31	1	—
Dartford B. ..	—	—	4	39	2	35	—	—	—	—	—	—	24	2	6	585	5	35	—
Deal B. ..	—	—	2	41	—	1	1	—	—	—	—	—	15	—	14	127	33	108	—
Dover B. ..	—	—	3	19	—	—	—	1	2	1	2	1	28	6	32	414	40	5	—
Erith B. ..	—	—	3	32	—	15	—	—	—	—	—	—	33	4	6	160	130	2	—
Faversham B. ..	—	—	—	9	—	—	—	—	—	—	—	—	8	1	27	46	13	—	—
Folkestone B. ..	—	—	8	106	—	1	—	—	—	—	1	—	25	2	59	168	23	4	—
Gillingham B. ..	—	—	7	115	6	3	—	—	—	—	—	—	59	9	31	508	37	2	—
Gravesend B. ..	—	—	6	76	2	10	—	—	—	—	—	1	29	3	17	800	41	—	—
Herne Bay U. ..	—	—	—	14	—	1	—	—	—	—	—	—	3	2	13	286	20	1	—
Hythe B. ..	—	—	—	3	—	—	—	1	—	—	—	—	5	—	6	79	5	—	—
Lydd B. ..	—	—	—	5	—	—	—	—	—	—	—	—	5	1	2	7	—	—	—
Maidstone B. ..	—	—	5	78	—	4	—	—	—	—	2	—	30	2	29	875	34	—	—
Margate B. ..	—	—	1	66	—	—	2	1	—	1	—	—	17	2	4	353	57	7	—
New Romney B. ..	—	—	1	16	—	—	—	—	—	—	—	—	2	—	4	8	2	—	—
Northfleet U. ..	—	—	—	27	—	—	—	—	—	1	—	—	12	—	12	223	40	—	1
Orpington U. ..	—	—	3	104	—	60	2	2	—	—	—	—	35	7	13	1,570	50	4	—
Penge U. ..	—	—	4	57	—	—	—	—	—	—	—	—	24	2	8	500	31	36	—
Queenborough B. ..	—	—	—	4	—	—	—	—	—	—	—	—	—	—	—	4	—	—	—
Ramsgate B. ..	—	—	2	26	—	3	—	—	—	—	1	—	25	1	8	543	44	94	—
Rochester B. ..	—	—	3	33	4	1	—	—	—	1	—	—	42	2	38	537	56	92	—
Sandwich B. ..	—	—	—	13	—	1	—	—	—	—	—	—	2	1	3	205	15	—	—
Sevenoaks U. ..	—	—	—	8	—	—	—	—	—	—	—	—	3	1	1	238	9	—	—
Sheerness U. ..	—	—	1	24	1	—	1	—	—	—	—	—	12	—	1	18	65	—	—
Sittingbourne U. ..	—	—	—	101	2	1	—	—	—	—	—	—	4	1	2	175	1	—	—
Southborough U. ..	—	—	—	5	—	—	—	—	—	—	—	—	2	—	1	95	—	5	—
Swanscombe U. ..	—	—	—	16	—	—	—	—	—	—	1	—	4	1	14	240	2	—	—
Tenterden B. ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	206	16	—	—
Tonbridge U. ..	—	—	—	14	—	2	—	—	—	—	—	—	8	—	20	719	24	7	—
Tunbridge Wells B. ..	—	—	4	29	—	14	2	—	—	—	1	—	13	1	16	243	42	26	—
Whitstable U. ..	—	—	3	34	—	—	—	—	—	—	—	—	1	1	5	232	12	—	—
TOTALS IN URBAN DISTRICTS ..	—	—	92	1625	21	217	10	6	2	4	13	9	690	75	586	15,489	1,336	505	1
RURAL—																			
Ashford, East ..	—	—	—	4	—	—	1	—	—	—	—	—	1	1	3	118	—	2	—
Ashford, West ..	—	—	—	—	—	—	—	—	—	—	—	—	10	—	13	219	—	—	—
Bridge-Blean ..	—	—	2	12	—	—	—	—	—	—	—	—	8	3	7	127	16	—	—
Cranbrook ..	—	—	—	8	—	—	—	—	—	—	—	—	4	—	1	76	16	12	—
Dartford ..	—	—	2	42	—	—	1	—	—	—	—	—	26	10	8	737	80	33	—
Dover ..	—	—	—	3	—	—	—	—	—	—	—	—	7	—	4	39	13	1	—
Eastry ..	—	—	1	18	—	1	—	—	—	—	1	—	17	6	8	399	9	1	—
Elham ..	—	—	—	4	—	—	—	—	—	—	—	—	5	1	1	100	9	—	—
Hollingbourn ..	—	—	2	13	—	—	—	—	—	—	—	—	6	2	7	144	—	2	—
Maidstone ..	—	—	2	33	—	2	—	—	—	—	1	—	7	1	4	388	25	1	—
Malling ..	—	—	4	38	—	—	—	—	—	—	—	—	15	5	13	792	55	30	—
Romney Marsh ..	—	—	—	9	—	—	—	—	—	—	—	—	3	—	5	16	—	—	—
Sevenoaks..	—	—	4	83	—	—	—	—	—	—	—	—	9	4	113	990	59	43	—
Sheppey ..	—	—	4	19	—	4	—	—	—	—	—	—	2	1	11	84	24	—	—
Strood ..	—	—	2	8	—	—	1	—	—	—	1	—	8	2	7	372	18	4	—
Swale ..	—	—	1	42	2	—	—	—	—	—	—	1	11	2	24	209	9	—	—
Tenterden..	—	—	—	2	—	—	—	—	—	—	—	—	2	1	1	196	1	—	—
Tonbridge..	—	—	—	14	—	2	—	—	—	—	—	—	8	—	20	719	24	7	—
TOTALS IN RURAL DISTRICTS ..	—	—	24	352	2	9	3	—	—	—	3	1	149	39	250	5,725	358	136	—
TOTALS IN URBAN DISTRICTS ..	—	—	92	1,625	21	217	10	6	2	4	13	9	690	75	586	15,489	1,336	505	1
TOTALS IN COUNTY ..	—	—	116	1,977	23	226	13	6	2	4	16	10	839	114	836	21,214	1,694	641	1



TABLE 4

Showing the number of notifications, incidence rates, deaths and death-rates of the principal infectious diseases in the County.

Year	1938	1958	1959	
			Kent	England and Wales (provisional)
<b>SMALL POX</b>				
No. of cases notified ..	4	—	—	1
Incidence rate .. ..	0·004	—	—	0·000
No. of deaths .. ..	2	—	—	—
Death rate .. ..	0·001	—	—	—
<b>SCARLET FEVER</b>				
No. of cases notified ..	2,913	1,307	1,977	47,889
Incidence rate .. ..	2·102	0·805	1·208	1·055
No. of deaths .. ..	10	—	—	1
Death rate .. ..	0·007	—	—	0·000
<b>DIPHTHERIA</b>				
No. of cases notified ..	1,361	—	—	103
Incidence rate .. ..	0·982	—	—	0·002
No. of deaths .. ..	58	—	—	—
Death rate .. ..	0·042	—	—	—
<b>ENTERIC FEVER</b>				
No. of cases notified ..	54	17	23	495
Incidence rate .. ..	0·039	0·011	0·014	0·011
No. of deaths .. ..	5	—	—	5
Death rate .. ..	0·005	—	—	0·000
<b>MEASLES</b>				
No. of cases notified ..	—*	8,294	21,214	539,207
Incidence rate .. ..	—*	5·107	12·967	11·880
No. of deaths .. ..	10	1	5	98
Death rate .. ..	0·007	0·001	0·003	0·002
<b>WHOOPING COUGH</b>				
No. of cases notified ..	—*	1,689	1,694	33,211
Incidence rate .. ..	—*	1·040	1·035	0·732
No. of deaths .. ..	10	—	1	25
Death rate .. ..	0·007	—	0·001	0·001
<b>POLIOMYELITIS AND POLIOENCEPHALITIS</b>				
No. of cases notified ..	36	40	19	1,022
Incidence rate .. ..	0·026	0·025	0·012	0·023
No. of deaths .. ..	—	4	2	66
Death rate .. ..	—	0·002	0·001	0·001

\* Not compulsorily notifiable.

TABLE 5

Showing causes of deaths in the URBAN DISTRICTS of Kent during the year 1959.

DISTRICT	Tuberculosis, respiratory	Tuberculosis, other	Syphilitic disease	Diphtheria	Whooping-cough	Meningococcal infections	Acute poliomyelitis	Measles	Other infective and parasitic diseases	Malignant neoplasm					Leukaemia, aleukaemia	Diabetes	Vascular lesions of nervous system	Coronary disease, angina	Hypertension with heart disease	Other heart disease	Other circulatory disease	Influenza	Pneumonia	Bronchitis	Other diseases of respiratory system	Ulcer of stomach and duodenum	Gastritis, enteritis and diarrhoea	Nephritis and nephrosis	Hyperplasia of prostate	Pregnancy, childbirth, abortion	Congenital malformations	Other defined and ill-defined diseases	Motor-vehicle accidents	All other accidents	Suicide	Homicide and operations of war	All causes		
										Stomach	Lung, bronchus	Breast	Uterus	Other malignant and lymphatic neoplasms																									
Ashford U. . . . .	3	—	1	—	—	—	—	—	—	10	20	6	4	28	1	3	35	42	14	41	17	3	7	18	3	—	—	1	5	—	3	16	5	4	4	—	—	296	
Beckenham B. . . . .	2	1	—	—	—	—	—	—	—	14	49	15	10	98	4	4	114	153	17	117	62	8	47	49	5	—	—	—	7	—	4	46	8	13	15	—	—	876	
Bexley B. . . . .	5	—	—	—	—	—	—	—	—	25	42	15	5	78	9	4	96	154	26	87	41	10	46	33	1	—	—	—	2	—	6	52	16	4	12	—	—	793	
Broadstairs and St. Peters U. . . . .	—	—	—	—	—	—	—	—	—	1	3	4	—	24	1	4	47	60	6	50	4	2	9	8	1	—	—	—	2	—	1	15	1	2	3	—	—	264	
Bromley B. . . . .	3	—	—	—	—	—	—	—	—	18	40	15	8	78	7	4	98	142	13	74	54	13	44	26	8	1	—	—	—	7	—	68	6	12	11	—	—	757	
Chatham B. . . . .	3	—	—	—	—	—	—	—	—	5	15	7	4	61	1	3	54	82	11	62	17	9	47	31	5	—	—	—	2	—	2	33	7	13	5	—	—	505	
Chislehurst and Sidcup U. . . . .	6	—	—	—	—	—	—	—	—	26	42	16	7	88	4	1	65	155	15	91	41	8	55	43	5	—	—	—	2	—	5	38	12	9	7	—	—	762	
Crayford U. . . . .	—	—	—	—	—	—	—	—	—	5	17	4	2	23	1	1	26	51	5	19	8	3	15	12	2	—	—	—	4	—	5	19	3	—	5	—	—	229	
Dartford B. . . . .	9	1	—	—	—	—	—	—	—	13	25	11	4	54	2	1	82	93	14	75	34	6	60	41	5	—	—	—	2	4	2	36	2	10	4	—	—	603	
Deal B. . . . .	3	—	—	—	—	—	—	—	—	1	3	4	5	23	2	1	55	47	2	28	7	7	11	20	2	—	—	—	5	—	5	24	4	6	1	—	—	291	
Dover B. . . . .	1	—	—	—	—	—	—	—	—	2	17	11	6	2	41	2	3	57	55	9	45	15	7	21	29	3	—	—	4	—	1	24	1	10	—	—	360		
Erith B. . . . .	2	1	2	—	—	—	—	—	—	11	24	14	5	38	4	9	52	83	18	65	28	7	21	29	—	—	—	4	—	3	23	4	1	13	—	—	469		
Faversham B. . . . .	—	—	—	—	—	—	—	—	—	3	10	6	—	15	—	—	41	20	7	54	8	2	6	13	—	—	—	1	—	—	1	9	1	1	—	—	206		
Folkstone B. . . . .	3	1	—	—	—	—	—	—	—	17	22	7	8	57	3	1	80	101	18	87	23	8	18	27	2	—	—	—	5	—	4	49	3	8	5	—	—	568	
Gillingham B. . . . .	7	—	2	—	—	—	—	—	—	27	26	10	7	72	3	9	123	115	40	115	27	9	51	45	3	—	—	—	6	—	7	58	8	16	9	—	—	811	
Gravesend B. . . . .	4	—	—	—	—	—	—	—	—	10	19	9	5	30	1	3	98	75	9	62	23	3	12	44	5	—	—	—	2	—	6	40	8	8	3	—	—	497	
Herne Bay U. . . . .	1	—	—	—	—	—	—	—	—	6	14	9	2	37	2	3	69	71	8	79	13	4	26	18	3	—	—	—	1	—	1	18	4	—	2	—	—	402	
Hythe B. . . . .	1	—	—	—	—	—	—	—	—	1	3	5	2	16	1	1	29	36	5	22	9	1	4	4	1	—	—	—	1	—	—	12	—	3	—	—	161		
Lydd B. . . . .	—	—	—	—	—	—	—	—	—	1	—	—	—	3	—	—	3	3	—	3	1	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	22	
Maidstone B. . . . .	8	—	—	—	—	—	—	—	—	13	21	13	4	59	4	4	91	91	11	129	29	8	29	31	2	—	—	—	3	—	10	67	13	12	5	1	—	671	
Margate B. . . . .	3	—	2	—	—	—	—	—	—	1	1	1	—	2	—	—	87	114	17	116	25	2	35	39	4	—	—	—	6	—	4	35	5	24	2	—	—	680	
New Romney B. . . . .	—	—	—	—	—	—	—	—	—	1	6	14	7	17	—	—	5	3	1	4	—	1	1	—	—	—	—	—	—	1	—	19	1	2	4	—	—	24	
Northfleet U. . . . .	—	—	—	—	—	—	—	—	—	1	16	14	—	17	—	—	33	29	4	24	6	2	5	65	36	6	—	—	—	4	—	10	55	12	6	3	—	—	208
Orpington U. . . . .	3	1	—	—	—	—	—	—	—	1	2	14	5	89	6	3	84	139	20	73	32	5	65	36	6	—	—	—	3	—	3	27	6	2	2	—	—	751	
Penge U. . . . .	1	—	—	—	—	—	—	—	—	8	17	3	—	25	1	2	29	37	8	48	14	1	18	16	3	—	—	—	3	—	3	27	6	2	2	—	—	36	
Queenborough B. . . . .	—	—	—	—	—	—	—	—	—	—	2	—	1	4	—	1	6	4	1	5	1	1	6	—	—	—	—	—	—	4	—	3	50	3	10	3	—	—	493
Ramsgate B. . . . .	1	1	—	—	—	—	—	—	—	17	17	7	4	44	2	4	59	76	8	66	38	3	18	35	7	—	—	—	6	—	12	39	7	13	1	—	—	530	
Rochester B. . . . .	3	—	2	—	—	—	—	—	—	12	12	12	7	45	1	3	64	82	12	88	18	11	43	18	6	—	—	—	6	—	—	12	39	7	13	1	—	—	56
Sandwich B. . . . .	—	—	—	—	—	—	—	—	—	2	1	4	1	6	—	—	8	9	1	6	10	3	9	13	1	—	—	—	—	—	—	8	2	2	1	—	—	215	
Sevenoaks U. . . . .	1	—	—	—	—	—	—	—	—	5	13	4	1	22	—	—	33	42	4	16	8	3	9	13	1	—	—	—	4	—	1	15	4	3	1	—	—	182	
Sheerness U. . . . .	—	—	—	—	—	—	—	—	—	6	10	3	1	19	—	3	26	26	5	32	8	1	7	4	3	—	—	—	1	—	—	22	1	2	1	—	—	92	
Sittingbourne and Milton U. . . . .	1	—	—	—	—	—	—	—	—	13	7	4	1	29	—	2	53	42	1	45	9	10	8	15	3	—	—	—	2	—	3	22	1	2	1	—	—	82	
Southborough U. . . . .	—	—	—	—	—	—	—	—	—	5	4	1	—	14	—	—	11	14	2	11	5	1	9	3	—	—	—	—	—	—	1	5	1	5	—	—	—	99	
Swanscombe U. . . . .	3	—	—	—	—	—	—	—	—	3	6	3	—	7	—	—	12	19	—	3	8	1	4	3	—	—	—	—	—	—	—	6	1	—	—	—	—	258	
Tenterden B. . . . .	—	—	—	—	—	—	—	—	—	1	6	—	—	8	1	—	26	6	1	31	3	—	1	—	—	—	—	—	—	—	—	8	—	—	—	—	—	99	
Tonbridge U. . . . .	—	—	—	—	—	—	—	—	—	1	13	5	1	27	1	1	39	46	5	29	13	1	19	14	1	—	—	—	3	—	4	19	—	9	2	—	—	258	
Tunbridge Wells B. . . . .	—	—	—	—	—	—	—	—	—	2	18	17	3	59	6	9	98	102	14	101	39	16	38	23	6	—	—	—	5	—	2	77	7	18	5	—	—	705	
Whitstable U. . . . .	1	—	—	—	—	—	—	—	—	4	14	3	2	35	2	3	47	61	11	64	24	3	12	9	2	—	—	—	—	—	1	23	1	9	1	—	—	343	
TOTALS IN URBAN DISTRICTS	80	10	18	—	1	4	1	4	32	366	665	266	115	1,442	78	93	2,035	2,480	363	2,067	756	181	806	761	100	142	56	107	99	6	120	1,076	156	253	119	6	14,864		

TABLE 6

Showing causes of deaths in the RURAL DISTRICTS of Kent during the year 1959.

DISTRICT	Tuberculosis, respiratory	Tuberculosis, other	Syphilitic disease	Diphtheria	Whooping-cough	Meningococcal infections	Measles	Other infective and parasitic diseases	Malignant neoplasm					Leukaemia, apleukaemia	Diabetes	Vascular lesions of nervous system	Coronary disease, angina	Hypertension with heart disease	Other heart disease	Other circulatory disease	Influenza	Pneumonia	Bronchitis	Other diseases of respiratory system	Ulcer of stomach and duodenum	Gastritis, enteritis and diarrhoea	Nephritis and nephrosis	Hyperplasia of prostate	Pregnancy, childbirth, abortion	Congenital malformations	Other defined and ill-defined diseases	Motor-vehicle accidents	All other accidents	Suicide	Homicide and operations of war	All causes
									Stomach	Lung, bronchus	Breast	Uterus	Other malignant and lymphatic neoplasms																							
Ashford, East	1	1	1					2	5	6	2	—	11	—	1	13	24	5	23	2	—	8	9	3	—	—	2	1	—	—	6	1	3	1	130	
Ashford, West	—	—	—					—	3	13	1	—	22	—	3	35	16	4	25	9	2	18	4	3	—	—	—	—	—	—	9	1	1	135		
Bridge-Blean	—	—	—					—	10	13	6	—	32	—	—	26	50	13	57	13	4	22	17	2	—	—	—	—	—	17	3	3	323			
Cranbrook	—	—	—					—	7	26	3	5	44	—	4	52	30	6	39	8	10	30	28	8	—	—	—	—	—	36	15	9	484			
Dartford	2	1	1					—	4	9	10	—	22	—	—	32	36	2	23	31	3	4	3	3	—	—	—	—	—	3	3	3	2	483		
Dover	—	—	—					—	3	11	12	4	10	—	4	45	27	2	23	27	2	4	15	1	—	—	—	—	—	22	—	—	2	337		
Eastry	1	1	1				1	—	3	9	10	—	31	—	2	43	32	4	34	9	2	5	3	3	—	—	—	—	—	3	—	—	3	337		
Elham	—	—	—				—	—	2	14	1	—	11	—	—	38	24	2	39	3	3	6	1	—	—	—	—	—	—	19	2	2	175			
Hollingbourn	—	—	—				—	—	2	10	6	1	14	—	—	32	24	4	21	6	10	9	1	—	—	—	—	—	—	3	9	2	177			
Maidstone	2	2	—				—	—	2	21	9	4	42	—	1	40	63	0	42	10	4	3	14	1	—	—	—	—	—	3	36	10	4	410		
Malling	—	—	—				—	—	12	8	6	—	8	—	2	59	9	7	46	5	32	19	4	—	—	—	—	—	—	5	5	1	391			
Romney Marsh	—	—	—				—	—	7	20	3	3	43	—	3	50	55	4	43	18	13	24	10	4	—	—	—	—	—	4	6	4	4	131		
Sevenoaks	—	—	—				—	—	8	3	3	1	13	—	1	20	18	4	22	3	—	9	3	—	—	—	—	—	—	—	28	5	9	4	213	
Sheppey	—	—	—				—	—	5	8	2	1	10	—	—	35	27	2	37	10	1	10	8	1	—	—	—	—	—	4	6	6	4	205		
Strood	3	—	—				—	—	3	13	4	2	19	—	—	34	30	5	45	3	1	11	2	1	—	—	—	—	—	4	4	3	4	205		
Swale	—	—	—				—	—	2	2	4	1	15	—	1	23	17	3	13	2	5	1	1	1	—	—	—	—	—	1	3	—	—	100		
Tenterden	—	—	—				—	—	9	15	6	2	30	—	1	41	48	6	41	19	11	16	18	3	—	—	—	—	—	21	3	—	—	314		
Tonbridge	3	—	—				—	—	6	15	9	2	30	—	1	41	48	6	41	19	11	16	18	3	—	—	—	—	—	21	3	—	—	314		
TOTALS IN RURAL DISTRICTS ..	29	2	5	—	—	2	1	10	92	183	78	26	406	21	24	599	87	625	200	66	250	174	40	37	19	46	36	1	38	369	60	77	34	—	4,228	
TOTALS IN URBAN DISTRICTS ..	80	10	18	—	1	4	1	4	366	665	266	115	1,442	78	93	2,035	363	2,067	756	181	806	761	100	142	56	107	99	6	120	1,076	156	253	119	6	14,864	
TOTALS IN COUNTY ..	109	12	23	—	1	6	2	5	42	458	848	141	1,848	99	117	2,625	450	2,692	956	247	1,056	935	140	179	75	153	135	7	158	1,445	216	330	153	6	19,092	
Rural Districts	0.82	0.06	0.14	—	—	—	0.03	0.28	2.61	5.18	2.21	0.74	11.50	0.59	0.68	16.71	2.46	17.71	5.67	1.87	7.08	4.93	1.13	1.05	0.54	1.30	1.02	0.03	1.08	10.45	1.70	2.18	0.96	—	119.77	
Urban Districts	0.62	0.08	0.14	—	0.01	0.03	0.01	0.25	2.85	5.18	2.07	0.90	11.24	0.61	0.72	15.86	2.83	16.11	5.89	1.41	6.28	5.93	0.78	1.11	0.44	0.83	0.77	0.05	0.94	8.39	1.22	1.97	0.93	0.05	115.85	
Administrative County of Kent ..	0.67	0.07	0.14	—	0.01	0.04	0.01	0.26	2.80	5.18	2.10	0.86	11.30	0.61	0.72	16.05	2.75	16.45	5.84	1.51	6.45	5.72	0.86	1.09	0.46	0.94	0.83	0.04	0.97	8.83	1.32	2.02	0.94	0.04	116.70	



TABLE 7

Showing the allocation of deaths to causes, in children under one year of age.

Causes of Death	Deaths under One Year of Age		
	1938	1958	1959
Whooping Cough .. .. .	4	—	—
Meningococcal Infections .. .. .	2	2	4
Diphtheria .. .. .	1	—	—
Tuberculosis—Respiratory .. .. .	1	—	—
—Other Forms .. .. .	9	—	—
Syphilitic Diseases .. .. .	4	—	—
Influenza .. .. .	4	—	2
Measles .. .. .	4	—	—
Acute Poliomyelitis and Polioencephalitis, Acute Infectious Encephalitis .. .. .	—	—	—
Malignant Neoplasm—all sites .. .. .	1	1	1
Intracranial Vascular Lesions .. .. .	—	1	—
Heart Disease, Diseases of Circulatory System .. .. .	—	—	—
Bronchitis .. .. .	19	15	20
Pneumonia .. .. .	125	56	41
Other Respiratory Diseases .. .. .	4	5	1
Ulcer of Stomach or Duodenum .. .. .	—	—	—
Appendicitis, Diarrhoea, other Digestive Diseases .. .. .	92	3	7
Nephritis and Nephrosis .. .. .	1	1	—
Premature Birth, Congenital malformations, other defined and ill-defined diseases.. .. .	593	396	377
Violence .. .. .	21	21	7
All Other Causes .. .. .	—	4	6
All Causes .. .. .	885	505	466

